



**Traditional Chinese Cultural Values and
Taiwanese Mothers' Attitudes towards
Seeking Professional Psychological Help:
the Role of Emotion Expressivity, Emotion Regulation
and Stigma towards Mental Illness**



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This dissertation is submitted for the degree of

Doctor of Philosophy

Declaration

This dissertation is the result of my own work and includes nothing which is the outcome of work done in collaboration except as declared in the Preface and specified in the text.

It is not substantially the same as any that I have submitted, or, is being concurrently submitted for a degree or diploma or other qualification at the University of Cambridge or any other University or similar institution except as declared in the Preface and specified in the text. I further state that no substantial part of my dissertation has already been submitted, or, is being concurrently submitted for any such degree, diploma or other qualification at the University of Cambridge or any other University or similar institution except as declared in the Preface and specified in the text

It does not exceed the prescribed word limit (80,000 words, excluding appendices, footnotes, reference list) for the Education Degree Committee.

Chun Hou Chang
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Abstract

Past research consistently found prevalent negative and reluctant attitudes towards seeking psychotherapy or counselling when facing emotional distress among individuals in Taiwanese society. Building on the literature, the underlying mechanisms in the relationship between these attitudes and the uniqueness of Chinese cultural values, especially its influence on views regarding emotional and mental difficulty are valuable to look into. The current study adopted an explanatory sequential mixed methods design to approach how Taiwanese mothers with a Chinese cultural inheritance view professional psychological help and the possible mechanisms underlying the formation of their attitudes.

Overall findings suggest that being immersed in the Chinese cultural context does have implication on how Taiwanese mothers see professional psychological help. In phase one, parallel mediation analysis of the survey data suggested that Taiwanese mothers' cultural inheritance affect their attitudes towards seeking professional psychological help indirectly through mediators including emotion regulatory strategies and stigmatization against mental illness. However, the mediating role of emotion expressivity was not supported, despite being a significant predictor. Interpretative Phenomenological Analysis of in-depth interviews with 10 Taiwanese mothers in phase two unveiled possible rationales behind the relationships found in phase one along with other imperative contributors. Possible reasons include being at risk of being associated with mental illness and stigmatized if one tries to seek professional psychological help. Being restrained by complex emotion expression rules and habits of using suppression as a regulatory strategy may also be hindrances to positive views of professional psychological help. Complicated emotion expression rules found provide possible explanations of emotion expressivity not being a significant mediator.

Overall findings provide future directions for research aiming to better understand attitudes towards professional psychological help in different cultural contexts, and for practitioners and policy makers especially in Taiwan to develop culturally sensitive approaches in advocating professional psychological help for the general public.

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Chapter 1. Introduction

My PhD project builds on my MPhil thesis and existing literature in order to explore further how Taiwanese mothers perceive professional psychological help and why their perceptions develop, with the ultimate aspiration and aim of knowing how their willingness to approach professional psychological help could be improved in the future. My MPhil research project (C. H. Chang, 2014) investigated Taiwanese mothers' attitudes towards utilising professional psychological help. Interviews with six Taiwanese mothers revealed that psychotherapy and counselling seldom appear spontaneously in their toolbox of dealing with their own or their children's emotional difficulties. Furthermore, when asked explicitly about their willingness to approach psychotherapy or counselling, Taiwanese mothers' responses showed that they were reluctant to receive such help, a finding which seemed to be in line with past research on the under-utilisation of or reluctant and hesitant attitudes towards mental health services in Taiwanese society. In the meantime, stigma against mental illness and the behaviours of seeking mental health services were also evident and associated negatively with the willingness to utilise professional psychological help.

Negative attitude towards and the under-utilisation of mental health services in Taiwan is an issue warranting consideration, given that psychotherapy and counselling, though developed mostly from an individualistic perspective in the Western world, have been empirically demonstrated to be beneficial for emotional difficulty cross-culturally when adapted in a culturally sensitive manner (Benish, Quintana & Wampold, 2011; Liu, 2006). There are also indigenous studies highlighting the necessity to popularise psychotherapy and counselling in Taiwanese society, and the potential benefits of professional psychological help for the maintenance and promotion of mental health in Taiwan (Lin & Lu, 2009; Lin, 2002; Chiang, 2013; Soong, 1998). As a PhD student passionate about promoting Taiwanese citizens' psychological well-being, I feel motivated by the ambition to introduce the benefits of parental involvement in psychotherapy to improve both parents' and children's mental health. Knowing the potential advantage of professional psychological help, it was quite striking for me to document the current low acceptance of seeking professional psychological help among Taiwanese mothers in my MPhil project

(C. H. Chang, 2014). As mothers are usually children's primary caregivers in Taiwanese society, their opinions and attitudes might have an influential role in making decisions on whether professional mental health help is sought, not only in their case but, importantly, for their children. Therefore, the understanding of the underpinning mechanism that keeps Taiwanese parents away from seeking psychotherapy and counselling is worth further exploration. I believe that through identifying this mechanism, researchers and practitioners can subsequently make efforts towards developing effective strategies in promoting parental involvement to benefit the psychological well-being of both children and parents.

In Taiwan, professional psychological help can be sought from counselling psychologists, clinical psychologists or psychiatrists who voluntarily seek professional training in psychotherapy. Common places where people in Taiwan can find such professionals are hospitals, private clinics, school counselling centres, community health centres and government mental health centres. According to a recent survey study (Lin, 2014), on average, one session (45 to 60 minutes) of psychotherapy or counselling in Taiwan costs about 1300 New Taiwanese dollars (approximately £32.5). Also, only those professional psychological help services provided by psychiatrists or referred to psychologists by psychiatrists or physicians are partially covered by public health insurance. This suggests that seeking professional psychological help in Taiwan can be considered as a relatively heavy financial burden on some individuals or it can also be a process that is relatively troublesome. Especially to people who already feel hesitant towards seeking professional psychological help, this may be a further hindrance.

There is, however, growing awareness of the importance of mental health among policy makers and the general public. For example, in 2011, Legislative Yuan (the highest legislature agency in Taiwan) has modified and passed the "Citizen education law" (2011 January 26) to increase the number of required professional counsellors in primary and secondary schools in Taiwan. Despite some progress being made in advocating and enhancing psychological well-being in Taiwan, however, there are still signs suggesting that the knowledge regarding and the extent of valuing mental health is still developing in Taiwanese

society. For example, the government agency in charge of the advocacy and execution of Taiwanese citizens' mental health-related affairs is combined with a qualitatively distinctive professional department of oral health under the supervision of the Ministry of Health and Welfare in Taiwan. Other than that, the media have reported that the Taiwanese government's budget for advocating mental health has gradually decreased over the past five years (Health For All editors, 2017a). This means that the policy in force is not intended to prioritise the subsidisation of the cost of receiving professional psychological help in current Taiwanese society.

According to past literature and my MPhil project, there is a general tendency for individuals in Taiwanese society to hold negative and reluctant attitudes towards seeking psychotherapy or counselling in the face of emotional distress (e.g. Lin, 2001; Kung, 2003; Chang, 2008; Chang, 2014; Fung & Wong, 2007). In the meantime, scholarship and the media argue that there might be an increasing portion of individuals, including young people, in need of professional psychological help that cannot be ignored in current Taiwanese society (e.g. Chang & Wang, 2015; Yeh & Lin, 2006). However, the rate of people in need who are actually seeking or had experience seeking relevant help is found to be surprisingly low in several studies among people with Chinese cultural background (e.g. Chang & Wang, 2015; John Tung Foundation, 2007). This gap between the need to seek professional psychological help and actually seeking it raises concern and triggered my interest in this area. Past research, however, including my own MPhil project, that concerned the issue of the under-utilisation of psychotherapy and counselling services in societies which adhere to Chinese culture, has often adopted a more partial view of the phenomenon. A deeper and more holistic mechanism underlying the relationship between Chinese culture and attitudes towards professional psychological help is seldom proposed or investigated in existing literature. Attempts to illustrate and unveil the actual mechanisms behind the development of attitudes towards seeking professional psychological help, especially with a Taiwanese sample, are therefore necessary in beginning to deal with the abovementioned gap.

In order to approach the research problem presented here, I embarked on the journey of my PhD project. This project uses a two-phased explanatory sequential mixed-methods design towards gaining a holistic understanding of the issue, starting from the attitudes of Taiwanese mothers towards professional psychological help in the Chinese cultural context. The dissertation is structured as follows. First, the literature review provides an overview of how my conceptual framework has developed, building on knowledge and inspiration from past theories and empirical studies. Second, the methodology chapter provides a discussion of why I am taking the philosophical stance I have espoused in this journey and the adoption of a suitable research design in order to examine my research questions. Third, I will delve into the first phase of my project and provide detailed descriptions and a discussion of the methods and data analysis adopted in this phase. Following the presentation of the methods used for Phase one, I will present the first batch of findings of the current study in the Phase One Results chapter, which provides supporting evidence for the mechanisms I propose. Subsequently, as Phase one informs the second phase of the current project, a detailed description of the methods adopted in Phase two will be presented. The second batch of my findings concerning some insightful themes drawing from interpretative phenomenological analysis of the interview data will be presented in the Phase Two Results chapter. Following that, a chapter combining the overall findings from both phases will be presented, as I seek a better and more complete understanding of how the Chinese cultural context shapes Taiwanese mothers' views on professional psychological help. Once all the results are presented, the discussion chapter that follows will engage with the implications of the current project in relation to the existing literature and my knowledge. Finally, conclusions drawn from the findings and reflections of the limitations of this research, as well as some recommendations for future research and practice will be presented.

Chapter 2. Literature review

Aiming at exploring the mechanisms and critical concepts that underline the under-utilisation of professional psychological help in Taiwanese society, several key terms were used first in order to search the literature in databases such as “PsycInfo”, provided by the Faculty of Education, and the Chinese online resources “Taiwan electronic periodical services” provided by the library of the University of Cambridge. The keywords used were: “Chinese culture”, “Taiwan”, “Taiwanese”, “Chinese”, “attitude”, “perception”, “opinion”, “mental health”, “mental illness”, “stigma”, “professional psychological help”, “psychotherapy”, “counselling”, “emotion”, “emotion socialisation”, “feeling”, “affect” and “coping.” The selection of the reviewed articles was initially based on readings of their titles and abstracts to confirm that the papers and texts would be indeed relevant to my research aim. Moreover, for a better understanding of Chinese ideologies, especially those relating to emotions, I went back to Taiwan for fieldwork in search of local materials, including books and papers relevant to the present project. Certain citations indicated in the articles found were also used as indexes in my search.

The following chapter will be my review of the relevant literature, presented in six sections. First, a brief introduction of the current status of attitudes towards professional psychological help in the Chinese cultural context, including Taiwan, will be provided in order to frame the context of the current issue of interest. Second, the stigmatisation of mental illness in the Chinese cultural context, and its possible association with attitudes towards professional psychological help will be briefly discussed. Third, specific values about emotion in Chinese cultures will be described. This, along with evidence of the unique emotional socialisation inherent in the Chinese cultural context will be introduced in order to give a general sense of cultural differences in the development of views regarding emotion expression and regulation. Next, the theoretical foundations alongside empirical evidence demonstrating the potential influence of views about expressing and dealing with emotions on the attitudes towards professional psychological help will be presented and discussed. Subsequently, the process of stress-coping will be delineated as a framework to infer how an individual in a Chinese cultural context would appraise seeking help from professional psychological help when facing emotional distress. In the fifth section, the

identified potential gaps in this current field of research will also be shared for an understanding of my motivation and aim to conduct the current study. Finally, along with all the theoretical and empirical evidence mentioned as my inspiration and foundation, I will present my current conceptual framework and proposed mechanisms behind the attitudes towards professional psychological help among Taiwanese mothers in the Chinese cultural context. Research questions aiming at exploring these mechanisms underlying the development of Taiwanese mothers' attitudes towards professional psychological help in the Chinese cultural context will be posed in accordance to this conceptual framework.

2.1 Attitudes towards professional psychological help in the Chinese cultural context

According to relatively recent surveys, investigations and research utilising Taiwanese samples, the prevalence of individuals experiencing various degrees of psychological distress or mental illness is not to be ignored in Taiwanese society (Chang & Wang, 2015; Fu, Lee, Gunnell, Lee & Cheng, 2013; Liou, 2008; John Tung Foundation, 2007; Yeh & Lin, 2006). For example, Yeh and Lin (2006) found that in the 7,888 effective questionnaires they received, 11.74% of participants demonstrated severe depressive mood. In a more recent study conducted by Chang and Wang (2015), the association between depressed mood and help-seeking delay was investigated. They found that in their sample of general college students, nearly a quarter of the students' symptoms of depressed mood conformed to a depression diagnosis. A survey conducted by John Tung Foundation in 2007 also suggested that 25.7% of college students self-reported to be in a depressive state and in need of further help. Finally, according to Fu and his/her colleagues (2013), the prevalence of mental illness in Taiwanese society reach as high as 23.8%, with the more severe and psychotic cases, such as schizophrenia and personality disorders, excluded. This means that there are potentially five million Taiwanese citizens who are possibly suffering from some degree of mental distress. These findings caution that the need for professional mental health services in Taiwan

cannot be underestimated.

There seems to be, however, a severe service gap between the need for using professional psychological help, such as psychotherapy and counselling, and the actual utilisation of such services in Taiwanese society. Surprisingly, past research and my own MPhil study (C. H. Chang, 2014) has repeatedly indicated the extensive phenomena of under-utilisation and delayed help-seeking of professional psychological help in societies and individuals that adhere to Chinese cultural values, including Taiwan (e.g. Chang & Chen, 2004; 2010; Chang & Wang, 2015; Kung, 2003; Ma, Huang, Chang, Yen & Lee, 2010; Soong, 1998; John Tung Foundation, 2007). Kung (2003) investigated help-seeking behaviours in Chinese-American samples and found that the majority of Chinese-Americans refused to seek external help actively. Among the 25% of Chinese-American participants who were willing to seek out help, merely 6% wanted to use a professional mental health service. Kung also mentioned in the same study that only 19% of Chinese-Americans diagnosed with a mental illness utilised medical or mental health services, which is evidently lower than the presented national average of 40% in the U.S.

If we take a closer look into a few studies conducted using Taiwanese samples, then the phenomena are very similar. For example, in Soong's (1998) investigation of how Taiwanese people manage anxiety or depression, only as little as 1.8% of respondents considered the option of 'visiting a counsellor.' Chang and Chen (2010) conducted in-depth interviews with Taiwanese adults to understand their help-seeking process when faced with depressive moods. They found that the average help-seeking delay is almost a year. Finally, with the similar intention of exploring the attitudes towards professional psychological help among the current generation of Taiwanese mothers, I embarked on my MPhil research project. In this project (C. H. Chang, 2014), I conducted semi-structured interviews with six Taiwanese mothers aimed at understanding their attitudes towards utilising professional psychological help. My analyses of the interviews indicated the existence of the phenomenon of the under-utilisation of professional psychological services and the reluctance to use them among Taiwanese mothers. For example, from the accounts of the majority of the Taiwanese mothers I interviewed, it emerged that

psychotherapy and counselling were not in their toolbox when it came to coping with emotional distress. Furthermore, some of them thought of speaking to a psychotherapist as a last resort when asked explicitly about their thoughts on professional psychotherapeutic help. In some cases, even if they had had experiences where they faced emotional difficulties beyond their control and had considered seeking professional psychological help, they reported hesitance frequently fuelled by close family and friends due to concerns of being stigmatised as mentally ill.

Researchers propose that the attitudes towards help-seeking, transmitted by family and social networks, may be both the enabling and impeding factors in determining the utilisation of mental health services (Deane & Chamberlain, 1994; Fischer & Farina, 1995; Chang, 2008; H. Chang, 2014). That is, negative attitudes towards professional help-seeking have been found to be a contributing factor in the avoidance of mental health services in past research. For instance, Chang (2008) found that positive attitudes towards help-seeking are associated with increased willingness to receive formal help. On the contrary, negative thoughts about psychological therapy are associated with an increased tendency to avoid mental health treatment (Deane & Chamberlain, 1994). These findings imply that people's negative attitudes towards receiving counselling or psychotherapy can be a barrier against seeking out professional mental health services, whereas positive thoughts towards seeking professional help can facilitate an individual's acceptance of such assistance. In conclusion, biased attitudes against seeking psychological therapy tend to direct one towards avoiding or delaying seeking professional assistance when psychological distress occurs.

Research on the attitudes towards seeking psychological help in individuals with a Chinese cultural background seemed to correspond with the phenomenon of the under-utilisation of professional psychological help mentioned above. Studies, my own MPhil research included, have consistently demonstrated the reluctant attitudes of individuals adhering to Chinese cultural values towards the utilisation of mental health services, including professional psychological help (e.g. Lin, 2001; Kung, 2003; Chang, 2007a; 2007b; 2008; Fung & Wong, 2007). Similar circumstances suggesting potential

resistant attitudes towards professional psychological help have been found in other studies, which demonstrated that individuals adhering to Chinese cultural values have a tendency to view professional psychological help as less preferable than other options or ultimately only as a last resort (e.g. Boey, 1999; Chen, 1987; Cheung, 1984; Guo, 1986; Jiang & Wang, 2003; Lin, 2001; John Tung Foundation, 2007; Yeh & Lin, 2006). For example, Chang (2007a; 2007b) repeatedly found Taiwanese students with higher levels of depressive symptoms to be more inclined to resist professional psychological help, and less likely to approach counsellors and psychotherapists. Another study addressing Taiwanese students' attitudes and behaviours towards seeking help when faced with psychological stress suggested that counselling and psychotherapy were not considered as common coping strategies for them (Chang, 2008). Instead, if necessary, Taiwanese students tend to seek informal helpers, such as friends and family members.

Lin (2001) conducted in-depth interviews in order to reveal Taiwanese students' views of counselling. Interestingly, Taiwanese students seemed to recognise the importance of counselling to individuals, yet at the same time regard counselling as the last resort when faced with difficulties. The interviews demonstrated that Taiwanese university students showed very little willingness to seek counselling services. Some students pointed out that even when the problems were beyond their own ability to solve, they still felt reluctant to visit a psychotherapist. They clarified this by illustrating that disclosing private personal distress to strangers can be embarrassing. Thus, actively seeking psychotherapy with unfamiliar therapists was very unlikely for them.

According to the above review, individuals in Taiwanese society demonstrated reluctance in utilising professional psychological help even in circumstances when they may need such help. It is worth noticing, however, that there is little published research in Taiwan to my knowledge that assesses professional psychological help-seeking attitudes more generally among other groups of individuals apart from students, let alone Taiwanese mothers in particular. As Chiang (2013) suggested in her articles discussing the barriers against children receiving professional psychological help in Taiwan, parents' attitudes towards professional psychological help are key in whether children can receive psychotherapy.

They play the role of gatekeeper in such decisions. When parents feel reluctant or hesitant due to lack of familiarity with professional psychological resources, or due to their doubts about professional psychological help, they might prevent themselves or their children from seeking related services. Past empirical studies in Taiwan have suggested that age is associated with attitudes regarding mental illness and psychological difficulties (Mellor, Carne, Shen, McCabe & Wang, 2013; Song, 2005). This means that different generations might view mental health issues differently. Furthermore, in Taiwanese society, mothers are most often the children's primary caregivers. As research has indicated that gender is associated with seeking professional psychological help (Wang, Huang, Jackson & Chen, 2012), the investigation into the attitudes towards psychotherapy and counselling among Taiwanese mothers in the current generation is key. Their attitudes are considered as a starting point in advocating mental health in both adults and children in Taiwan, as how the mothers themselves view psychotherapy and counselling may be a determining factor for professional psychological help-seeking for themselves and their children.

Also, as can be seen from the previous discussion, there are some barriers in the Chinese cultural context that evidently impede or delay Taiwanese citizens' professional psychological help-seeking. Chang and Chen (2010) indicated that the threat of cultural values is one of the main resisting and delaying factor in help-seeking professional psychological help among Taiwanese adults in the stage of deciding whether to seek psychological support. This means that attitudes towards professional mental health services may be deeply influenced by Chinese cultural values in Taiwanese society, and can in turn affect actual behaviours of seeking mental health services. It is, therefore, imperative for mental health care providers and researchers to understand how Chinese cultural values shape attitudes towards mental illness and help-seeking behaviours (Chang, 2008; Yeh, 2002). That is, what factors are contributing to the repeatedly found associations between Chinese cultural contexts and attitudes towards professional psychological help. With the greater ambition to enhance both parents' and children's psychological well-being in Taiwan, the present study aims at gaining a more in-depth understanding of Taiwanese mothers' attitudes towards professional psychological help in the Chinese cultural context, and explore relevant

factors associated with and underlining the relationship between traditional Chinese cultural values and attitudes towards professional psychological help.

2.2 Chinese culture and the stigmatisation of psychological problems

Past literature and my own research have also suggested that stigmas against mental illness and psychological distress are evident in Taiwanese society and are very likely related to negative attitudes towards professional psychological help. In my MPhil (C. H. Chang, 2014), I reviewed in depth relevant past research on the influence of Chinese cultural values on views of mental illness, and the possible association between such views and attitudes towards seeking professional psychological help. Given this foundation, I will only briefly touch upon this in the current review.

My MPhil research (C. H. Chang, 2014) and past literature have shown that negative stigma and stereotypes towards mental illness are especially pervasive in Chinese cultural groups (inter alia see Cheon & Chiao, 2012; Furnham & Wong, 2007; Hsu et al., 2008; Ryder, Bean & Dion, 2000; Shokoohi-Yekta & Retish, 1991; Yang, 2007; Yang & Kleinman, 2008; Yang et al., 2013). Influenced by values emphasised in the primary Chinese philosophies, including Confucianism, Taoism and Buddhism, Chinese populations generally hold negative attitudes and conceptions toward mental illness (Hsiao, Klimidis, Minas & Tan, 2006; Mak & Cheung, 2012). In traditional Chinese culture, psychological distress and mental illness are viewed negatively and even with a sense of shame. This is due to the fact that those afflicted with mental illness have often been seen as extremely dependent on others, incapable of fulfilling obligatory roles and duties, having personality weaknesses, moral flaws or even as being punished for one's transgressions. They are generally thought to lack willpower and maturity in mind, form unstable relationships, lose face, be unable to maintain the family's reputation and status, challenge the value of restrained behaviour, have unbalanced emotions, and be a threat to "reproductivity" (Chang, 2008; Huang, 1997; 2001; Hsiao et al., 2006; King & Bond, 1985; Kung, 2003; Lam et al., 2010; Mellor et al., 2013; Yang et al., 2013; Sue & Morishima, 1982).

It has also been suggested that in addition to the above, stigmas against mental illness and psychological distress evident in Taiwanese society may be very likely related to negative attitudes towards professional psychological help. Stigma towards mental distress and illness is found to be prevailing and can hinder an individual's willingness to seek professional help and support across cultures (Angermeyer & Dietrich, 2006; Rusch, Angermeyer & Corrigan, 2005; Sirey et al., 2001; Tsang, Tam, Chan & Cheung, 2003). According to the literature reviewed, the stigmatisation associated with mental illness might be a crucial factor contributing to the under-utilisation of professional psychological help in Taiwan (Wen, 1998; Hsiao et al., 2002). As one can imagine, the mere act or intention of seeking psychotherapy and counselling might imply that one is mentally ill or distressed. This speculation is supported by an analysis of the interviews in my MPhil project (C. H. Chang, 2014), which has revealed that fear of being labelled mentally ill is associated with Taiwanese mothers' negative attitudes regarding professional psychological help.

In short, the literature reviewed and the interviews conducted in my MPhil project highlight general negative attitudes towards psychotherapy and counselling among Taiwanese mothers. In the meantime, the stigma against mental illness was evident and associated with the mere act and intention of seeking mental health services and the attitudes towards the utilisation of professional psychological help. This means that the stigma against mental illness is worth considering as a possible contributing factor in understanding the mechanism underlying the development of attitudes towards seeking professional psychological help in the Chinese cultural context. In other words, one possible mechanism to explain the formation of persistent negative and reluctant attitudes towards seeking professional psychological help in Taiwanese society might be through deeply entrenched cultural perceptions of mental illness from an individual's adherence to traditional Chinese cultural values. This may be one way that being immersed in Chinese cultural context can shape how Taiwanese mothers view seeking professional psychological help. Other possible mechanisms are related to the characteristics of professional psychological help, that is its essence of in-depth exploration of one's emotional experience. I will illustrate its link to the unique

views and habits of expressing and dealing with emotions in the Chinese cultural context, by examining emotion socialisation in the Chinese cultural context in the next section.

2.3 Emotion socialisation in the Chinese cultural context: Chinese culture and unique views regarding emotion expression and regulation

Unique conceptions about emotions exist in Chinese cultural societies, especially for intensive emotions. Bereavement would be a salient example to illustrate this phenomenon. In Western cultures, people attend funerals to pay their respects to the deceased. Most often when they meet the family or loved ones of the deceased, the phrase “my condolences” would be used as the most proper way to show sympathy towards those devastated by the fact. Conversely, in societies where Chinese cultural values are embedded, the most common saying to people in bereavement is “請節哀 (Chin Jie Ai),” meaning please curb your grief. I conducted an informal survey among friends and family back in Taiwan and, according to them, such phraseology conveys messages such as “sadness is bad for your health,” “crying or expressing sadness will not help change anything.” This demonstrates that the expression of strong negative emotions is not encouraged in this cultural context.

Parents in such a unique cultural context may view emotion in a specific way and, in turn, influence the socialisation process from generation to generation. Parental beliefs are schemata or mental representations of what they think about themselves as parents, their children and child-rearing ideologies (Coplan, Hastings, Lagacé-Séguin & Moulton, 2002). Cross-cultural studies regarding parents’ attitudes, values and behaviours provide a lot of information about the differences in socialisation practices within different cultural contexts (Rubin & Chung, 2006). More specifically, parents adopt parenting behaviours that are contingent on their beliefs and, thus, their beliefs can significantly contribute to affecting their responses to their children’s behaviour (Cheah & Rubin, 2004; Halberstadt, Thompson, Parker &

Dunsmore, 2008). Emotion socialisation is a culture-specific process in which children are taught and guided about emotion-related matters, including the values of different emotions and the appropriateness of the ways of expressing them (Chan, 2012). It can be manifested in parenting practices, including parental responses to children's expression of emotion (e.g. Fabes, Poulin, Eisenberg & Madden-Derdich, 2002; McElwain, Halberstadt & Volling, 2007), parental discourses with children about emotion (e.g. Wang 2001; 2003) and parental expression of emotion (e.g. Dunsmore & Halberstadt, 1997).

Parental cultural values can have an impact on the process of emotion socialisation for their children through various mechanisms (Cole, Tamang & Shrestha, 2006; Halberstadt & Lozada, 2011; Markus & Kitayama, 1991). To be more specific, cultural values provide a framework, which guides people in viewing, discussing and expressing emotional experience. As Gordon (1991) suggested, parents are in a position where they can manipulate children's exposure to emotional experiences and, in turn, prepare children to learn culture-appropriate emotion sensing and the rules of displaying those emotions. According to Halberstadt and Lozada (2011), emotional experiences may be valued or devalued differently in different cultures. The kind of emotions being valued may differ, as well as the preferred levels of emotional arousal in different cultural contexts. Cultures also influence the way people appraise what sort of emotions are contingent on specific social contexts. These beliefs then determine how caregivers might emotionally socialise or interact emotionally with their children (Halberstadt & Lozada, 2011). For example, in cultural contexts which devalue emotions or deem the lowest arousal levels of emotional intensity as most appropriate, caregivers may adopt an attitude that conveys the message to children that emotional experiences are not vital, such as ignoring infants' emotional expressions or distract their attention to something else away from experiencing the emotion itself. In that case, children may get used to undifferentiated emotional expression and cut back their attention for exploring the complexity of emotional experience. In relation to this, Fivush and Wang (2005) proposed that the development of children's understanding of emotions and their emotional regulation characteristics can be influenced by the ways in which emotions are discussed with them in everyday conversations. The

developmental outcome related with emotional socialisation, such as emotional understanding, appears to be affected by different conversational styles about emotions in Euro-American and Chinese families, as a study has shown that Chinese preschoolers developed less emotional understanding than their American peers (Wang, 2003).

In addition, children's learning about emotion builds on parental behaviours related to their emotional experience (Chan, 2012). Parents' responses to children's emotions, such as their reaction to emotion, coaching, comforting behaviours or reprimanding, provide immediate feedback to the child and convey messages relating to parents' values about emotion expression and regulation, about proper ways of expressing certain emotions in certain contexts, and parental ideas regarding the causes and consequences of emotion. Furthermore, parental coping strategies in facing emotions may be modelled or internalised by their children.

Very few studies have focused on examining how emotions are addressed in conversations between parents and children in the face of highly emotional events, let alone compare these patterns across cultural contexts. One cross-cultural study (Fivush & Wang, 2005) attempted to investigate this issue by asking mothers in the U.S. and China to narrate personal experiences with their children regarding different levels of emotions. They found that when asking parents to remember how they reacted and discussed emotions with their children when they encountered personal emotional events, parents in the U.S. believed that their children were capable of having independent emotional experiences and, therefore, were more likely to try to understand those of their children. This means that parents in the U.S. discussed and negotiated more about what their children were feeling than their Chinese counterparts. Conversely, Chinese parents negotiated significantly less and assumed that they could access directly their children's emotional experiences.

Another interesting finding in Fivush and Wang's study (2005) is that it seemed to be difficult for Chinese mothers to pinpoint concrete highly emotional events that they had shared with their children. This was consistent with past findings of cultural differences in autobiographical memory. Nonetheless, it

is worth asking in the context of this study, whether they have difficulty in accessing these memories due to pure cognitive ability differences or other possible mediation, or whether they simply have difficulty in sharing highly emotional events. Do families in the Chinese cultural context lack opportunities to discuss emotion-related events, a fact which subsequently influences their memories of such experiences? Did the researcher in this study build up enough rapport with parents in the Chinese cultural context for them to feel comfortable enough to share emotionally intensive experiences with a non-familiar researcher?

The above discussion resonates with Daniel Stern's (1998) description of affect attunement between parents and children. He proposed that, beginning early in life, between nine and twelve months of age, innate intersubjectivity truly develops when the infant starts to discover his/her own mind. Affect attunement is deemed to be the first and most important mode of sharing subjective experiences between infants and parents (Stern, 1998). Stern argues that affect attunement happens rapidly and largely out of awareness. Parents' own subjective world, including beliefs, desires, fears and prohibitions, forms a template to shape the intrapsychic experience of the child through the selective use of attunement. That is to say, parents make unconscious choices in terms of what to attune to. In doing so, parents unconsciously impose some degree of selective bias in their attunement behaviours and, in turn, impact the infant's interpersonal world. Moreover, parents' use of selective attunement continues throughout their children's childhood. Stern stated that after continuous repetition of these interpersonal interactions, children develop an interpersonal representation called implicit relational knowledge. As just mentioned, parents have their own implicit relational knowledge (which they have learnt in their own childhood) making selective attunement to their children; therefore, this cycle constitutes the mechanism of the intergenerational transmission of affective style (Marrone, 2014).

In summary, the above literature showcased the possibility of the existence of differences in the understanding of emotions, which is a crucial component of humanhood, depending on cultural contexts. This means that values regarding emotions in different cultural contexts may impact children's emotional

well-being in at least three ways. First of all, parents themselves have grown up under the influence of specific emotion socialisation processes according to their cultural background and have developed their own emotional patterns with which they interact with their children. As children develop normally, it is natural for a parent bearing their own issues and adhering to their usual patterns to try to adapt to these changes and interact with reciprocity and coherence with their children (Stern, 1998). Second, parental conceptions about emotions can influence the decision-making process of seeking professional psychological help for their children, since the latter cannot yet make this decision on their own. Third, parents' emotional socialisation goals according to their cultural context can impact on the development of children's understanding about emotions and, therefore, affect how they might choose to deal with their emotional distress in the future. This means that by investigating parental views about expressing and dealing with emotions one can not only see the concepts of emotion in current Chinese societies but also how the next generation will very likely view emotions in the future, and how similar values can pass from generation to generation.

2.3.1 Chinese cultural values about emotion

As can be seen in the above discussion, cross-cultural studies that compare Western and Chinese cultures provide a particularly clear and efficient way of investigating the uniqueness of cultural values regarding emotion because of the sharp contrast between these two cultures regarding the perception, recognition and expression of emotion. Certain rules of emotions are developed according to one's cultural context (Yin & Lee, 2012). The cultural and social context in which an individual considers themselves to belong to determines one's view of 'which emotions are likely to be experienced when and where, on what grounds and for what reasons, by what modes of expression, and by whom' (Kemper, 1993, pp. 41–42). It is important to note, however, that although cross-cultural studies are comprehensive in facilitating understanding of the phenomena, there are still individual differences within the Chinese cultural context itself, which will be further discussed later on. The purpose of this section is to present the unique

perspective of the Chinese cultural context regarding emotions and explain the potential associations between Chinese cultural values and views of emotion expression and regulation. The followings discuss empirical studies and also ancient Chinese texts to help build a better understanding of what kind of “rules” Chinese cultures have regarding emotions.

A meta-analysis suggested that, generally, people within societies that adhere to traditional Chinese cultural values tend to be more collectivistic and less individualistic (Oyserman, Kimmelmeier & Coon, 2002). Many studies (e.g. Chen, 2000; Kitayama & Markus, 1994; Triandis, 1995; Triandis, McCusker & Hui, 1990) state that within more individualistic cultures, personal goals are deemed as more important, or even more crucial, than group goals as long as they do not pose a threat to other members in society. Therefore, in these circumstances, the expression of individual emotions is highly valued and considered beneficial for personal health, while it can facilitate the maintenance of interpersonal relationships. Conversely, in collectivist cultures, every individual is tightly intertwined with the larger group, and an individual’s self is defined through an individual’s interpersonal relationships and his or her group identity. Thus, it will be necessary sometimes to suppress individual feelings in order to maintain group harmony and achieve group goals. For example, Chen (2000) argued that collectivistic cultures emphasise emotional self-discipline. Emotional suppression or the control or inhibition of emotion expression tend to be valued as an indication of self-control and respect for maintaining social harmony in collectivistic cultures, while the expression of emotions is more valued in individualistic cultures (Markus & Kitayama, 1991; Matsumoto, Yoo & Fontaine, 2008; Mesquita and Frijda, 1992). In other words, emotions inevitably serve a relational function, as emotions can facilitate, maintain or disrupt relationships with others. As a result, it may be more adaptive for individuals in collectivistic cultures to behave in ways that are less emotionally expressive, given the possible impact on interpersonal relationships for emotional expression (Suveg et al., 2014). This implies that individuals in collectivistic societies, whose interdependent selves are more dominant, may view emotional expression more as a way of maintaining relationship harmony instead of a purely genuine means of reflecting personal feelings

(Markus & Kitayama, 1991). In particular, the communication and expression of negative emotions might be seen as threats to interpersonal harmony in cultures with high collectivistic characteristics, such as the Chinese and the Japanese (Matsumoto, 1989; Yin & Lee, 2012). Even if individuals adhere to more collectivistic cultural values that do allow for the expression of feelings and emotions explicitly, they do it knowing that they need to pay extra attention to the potential consequences and impacts of emotional expressions to others. Therefore, in terms of the communication and expression of emotions, indirectness, implicitness and expression tend to be preferred by individuals in the Chinese cultural context.

Empirical studies have found results consistent with these notions. For instance, Chinese parents have been shown to value emotional restraint behaviours more than parents in Western cultures (Chen, 2000; Tu, 1998; Wu, 1996). In addition, for the purpose of maintaining relational harmony, the expression of emotion is carefully regulated and emotions are usually experienced with lower frequency, intensity and duration in the Chinese cultural context (Bond, 1993). In a cross-cultural comparison study, Anolli, Wang, Mantovani and De Toni (2008) found that a more restrained style of vocal emotion expression is favoured by the Chinese than their Italian counterparts. Furthermore, in order to achieve interpersonal harmony, Chinese parents are inclined to encourage the suppression of ego-focused emotions (e.g. anger) and conversely encourage the expression of group-oriented emotions (e.g. sympathy, gratitude; Markus & Kitayama, 1991; Saw & Okazaki, 2010; Wu et al., 2002). Yin and Lee (2012) found that in order to establish a good relationship with their students, Chinese teachers make an effort to manage and regulate their emotion expression in certain ways, including hiding their negative emotions and maintaining a positive set of emotions.

Further, Confucian philosophy and Taoism have been recognised as the undeniable origins of the most important traditions and values in Chinese societies (Tu, 1998). One of the most salient differences of the Confucian philosophy from Western approaches is the emphasis on emotional restraint (Wu, 1996). As the foundation of cultural values in Chinese societies, Taoism and Confucianism both value emotional control (Chan, 2012). Emotions are deemed as harmful to an individual's body and soul

in the philosophy of Taoism, which emphasises self-control and serenity in emotions. Confucianism, conversely, advocates that the expression of emotion could potentially pose the risk of disrupting interpersonal relationships due to its great emphasis on interpersonal harmony. Past research indicates that individuals with a Chinese cultural background have a tendency to encourage emotional control, exhibit a negative view of emotion and regard highly expressive individuals as poorly regulated and socially immature (Ho, 1986). Moreover, studies have reported that in Chinese cultural contexts, adults seldom engage in overt emotional and affective interchanges with children (Chen et al., 1998).

At the very beginning of Chinese history, nature religions, ancestor worship and oracles were dominant. Until the time of 春秋戰國 (Chun Qiu Zhan Guo), when war between countries continued to ravage the whole of China, in order to find a way to dominate, countries began to focus on developing realistic ideologies in order to dominate, unite and rule all countries. This is when Confucianism started to spread. One can imagine that due to this historical background, Chinese ideology has more to do with politics, and military and diplomatic affairs, rather than private emotional experiences. Among all the thinkers in this period, Confucius had the most to say about being a person and he proposed that “仁 (Rén)” and “禮 (Lǐ)” were the foundations of the morally principled man and country. His work and ideology were then integrated and carried forward by his students to form in later times an ideology called “儒 (Rú)”, which is also known as Confucianism, and which no doubt has the greatest and deepest impact on Chinese cultures. From the beginning, being a person was never about being just a person. “修身，齊家，治國，平天下 (xiū shēn , qí jiā , zhì guó , píng tiān xià)” (大學, Da Xue) means that, first, one needs to cultivate oneself, so that one can subsequently take good care of one’s family. It is only when families are in good shape, that a country can be governed. Finally, the world can be at peace. Therefore, being a person is not just about being oneself, as one’s character and behaviour can affect the fate of the world around them. Confucianism taught a lot about self-constraint, regulation of the mind, and expectations of emotions in order to approach moderation. It is about the ideal personality and establishing a model of personal accomplishment. “踐仁成聖 (jiàn rén chéng shèng)” means that you need to enact

and practise “仁 (Rén)” in order to become a saint. That is to say, to people in the Chinese cultural context “仁 (Rén)” is an absolute virtue. It is an ideal state that everyone strives to achieve. Confucius also said: “仁者不憂 (rén zhě bù yōu)” (論語 · 子罕第九, Lun Yu: Zi Han No. 9), which means that people with “仁(Rén)” will not feel troubled and worried. “君子不憂不懼 (jūn zǐ bù yōu bù jù)” (論語 · 顏淵第十二, Lun Yu: Yen Yuan No. 12) denotes that people who bear “仁 (Rén)” with them will not feel worried and afraid. Another statement from one of “儒 (Rú)”’s most important figures, Meng Zi, is “不仁者久耽則亂 (bù rén zhě jiǔ dān zé luàn)” (孟子梁惠王上, Meng Zi Liang Huei Wan), meaning that people without “仁 (Rén)” in mind will spiral into chaos if they worry for a long time.

Chinese cultural beliefs may also contribute to the emotional regulation strategies of individuals. For example, the moderation of intense emotional experience is valued in Eastern cultures, including the Chinese culture (Tsai, 2007). One of the key ancient texts 中庸 (Zhong Yong) says in regard to emotions: “喜怒哀樂之未發，謂之中；發而皆中節，謂之和。中也者，天下之大本也，和也者，天下之達道也。致中和，天地位焉，萬物育焉。(xǐ nù āi lè zhī wèi fā, wèi zhī zhōng; fā ér jiē zhōng jiē, wèi zhī hé. zhōng yě zhě, tiān xià zhī dà běn yě, hé yě zhě, tiān xià zhī dá dào yě. zhì zhōng hé, tiān dì wèi yān, wàn wù yù yān)” (when joy, anger, sadness or happiness haven’t happened, your heart is at peace and without bias). This is called Zhong (moderation); if every occurrence of emotion fits its optimal extent, and without being too much or too little, it is called He (harmony). Zhong is the source of all things and He is the way the world follows. If the rationale of Zhong and He can be advocated and achieved to a perfect state, then all things can find their place and live as they live. Confucianism states the importance of self-restraint and self-inspection. It emphasises the criticalness of being able to regulate all kinds of emotions rationally to an optimal degree in order to gain peace and subsequently being able to achieve something great. Using reason, logic and moral principals to guide emotions and feelings is regarded as putting “仁 (Rén)” into practice (Chen, 2013). This belief may influence the preferred strategies of regulating emotions in individuals within Chinese societies. Such individuals are more likely to adopt regulation^[1] strategies that facilitate disengagement from strong emotions than in Western cultures, where

individuals may more often encourage both the experience and the expression of emotions (Fiske, Kitayama, Markus & Nisbett, 1998; Markus & Kitayama, 1991).

Although emotions are universally critical components in human experience, according to the literature and the above discussion, the value of different emotions and social norms related to cultural beliefs guiding the expression of emotions and preferred ways of dealing with emotions may vary according to cultural contexts (Matsumoto, 1993; Soto, Levenson & Ebling, 2005; Tsai, 2007). Empirical studies have provided evidence that individuals with Chinese cultural values have distinct views about emotional experience particularly in terms of emotion expression and regulation. Tsai and Levenson (1997) examined cross-cultural differences in the intensity of experienced emotions by asking couples to discuss conflict in their relationship, and found that Chinese-Americans reported fewer high-intensity positive and negative affects than did their European-American counterparts. Similarly, in a cross-national study investigating the typical intensity of the emotional experiences of individuals from different cultural backgrounds, both participants from China and Taiwan reported much lower-intensity emotions than did their American and Australian counterparts (Eid & Diener, 2001). More recent studies also provided similar evidence. Davis et al.'s (2012) study, in which emotional experience and regulatory strategies were compared between Chinese and American samples through viewing a series of pictures that were designed to elicit different emotions, Chinese men were found to report less intense levels of emotions, while American women reported the highest levels of emotions in response to negative stimuli. Furthermore, disengagement was adopted most often by Chinese men as an emotion regulation strategy in the same study. Preferring withdrawal from experiencing intense emotions and expressing them may be related to the observed under-utilisation of professional psychological help. As can be imagined, being in a psychotherapeutic relationship involves frequently engaging in one's emotions and feelings.

The cultural values discussed above can also impact on how the next generation experiences emotions. Inevitably, cultural norms influence children's emotional development both directly and indirectly through parents' emotion socialisation behaviours (Cole & Dennis, 1998; Cole et al., 2006).

More specifically, as mentioned earlier, parenting behaviours under the influence of cultural values can affect children's emotional development through instructing and guiding children about which emotions should be displayed, when and how (Matsumoto & Juang, 2012). In addition, emotion regulation, which is a developmentally acquired process, first develops in the context of early parent-child interaction (Thompson, 1994) and is also heavily influenced by cultural norms (Mesquita & Frijda, 1992). Empirical research does indicate that Chinese cultural values on emotion control, suppression and inhibition may influence how parents socialise children's emotion expression and regulation processes. According to Halberstadt and Lozada (2011), Chinese parents bring up their children with a relatively high tendency to avoid displaying their thoughts and feelings. Empirically, Chinese mothers were found to utilise explicit verbal instructions in an attempt to socialise negative emotion control among preschool children (Cheah & Rubin, 2003). In the study of Camras and colleagues (Camras, Chen, Bakeman, Norris & Cain, 2006) it was revealed that European and Chinese-American mothers reported significantly higher levels of positive emotional expression than Chinese mothers. Furthermore, punitive reactions to children's negative emotions were found to predict positively children's externalisation of problems in a longitudinal study of a Chinese sample (Tao, Zhou & Wang, 2010). Also, Chan (2012) found that the extent in which Chinese mothers endorsed the belief of “管” (Guan), which is a parenting belief emphasising parents' responsibility in their children's early training, originating in Confucian philosophy (Chao, 1994), was negatively correlated with the idea of open exposure to emotions and positively correlated with emotion-dismissing approaches. Finally, in a most recent cross-national study examining family emotional functioning in Chinese and American samples, both Chinese parents and children reported less emotional expression than their U.S. counterparts, while, at the same time, different emotion regulation patterns were found (Suveg et al., 2014). Even when Chinese parents actually talked with their children about emotions, they used it as a tool, strategy and opportunity to teach or train their children about certain moral lessons, rules or disciplines instead of facilitating children to understand and explore their feelings. For instance, several studies have illustrated that maternal conversational practices mostly focus on facilitating children

to develop and learn proper behaviour in negative emotion situations and may include the use of shaming in families in China and Taiwan (Miller, Wiley, Fung & Liang, 1997; Wang, 2001; Wang & Fivush, 2005).

Summarising the above, it is evident that Chinese culture values the suppression, control and inhibition of emotional experiences, and individuals, including children, in this cultural context are given less opportunity to discuss and explore their emotions during the socialisation process. The following discussion in the next section will give possible explanations of why these tendencies may be associated with how an individual views seeking professional psychological help.

2.3.2 Affect Valuation Theory (AVT)

From the literature presented above, a conclusion can be drawn that Chinese culture has a unique way of viewing emotions, and that the ideal state of emotions valued in Chinese culture differs from that of the West. Here, the Affect Valuation Theory will be introduced to discuss further the possible inconsistency between an individual's ideal emotions and actual feelings, in order to inform a possible explanation of Chinese individuals' preferred ways of dealing with emotions and its relationship to attitudes regarding seeking psychotherapy or counselling.

According to Tsai, Knutson and Fung (2006), AVT makes three hypotheses, starting with "ideal affect," which is defined as the affective states that people would ideally like to feel and value. This is a distinct construct from "actual affect," which is defined as the affective states that people truly feel and experience. Second, while temperamental characteristics shape actual affect more than ideal affect, the latter is shaped by cultural factors to a greater extent than actual affect. In other words, whereas ideal affect represents a goal, actual affect can be more precisely described as an actual response. Previous studies have supported the first part of AVT's hypotheses by demonstrating that the affective experience of participants differs significantly from their desirable affective states (Barrett, 1996; Rusting & Larsen, 1995). In confirmatory factor analysis, the two-factor model that considers actual and ideal affect as

distinct constructs provided a better fit of the data than did the single-factor model (Tsai et al., 2006). Lastly, the third premise of affect valuation theory is based on control process theories (e.g. Carver & Scheier, 1982; 1990), which state that people aim to reduce the discrepancy between their actual and ideal affects by making an effort to adjust their mood to approach their ideal affect.

Through the previous discussion on Chinese cultural values about emotions, it is understood that Chinese culture has unique ways of shaping people's beliefs of what is good, moral and virtuous, as well as which affective states are desired. Consistent with this, Tsai and her colleagues (Tsai, Miao, Seppala, Fung & Yeung, 2007) proposed that as a result of the distinct emphases different cultures place on influencing versus adjusting to others, American and Chinese individuals differ in their value of high-arousal positive states (HAP), such as excitement, and low-arousal positive states (LAP), such as calmness. They predicted that people with adjusting goals (i.e. most East Asian cultures, including the Chinese) tend to be encouraged to suppress their personal needs and change their own behaviour to meet others' needs; in this case, when it comes to the affective state, they will value LAP more and HAP less than people with influencing goals, who assert their personal needs and change others' behaviours to meet those needs (i.e. American culture).

It is worth noticing that the AVT is mainly about 'people say[ing] that they want to feel good, [bearing in mind that] people want to feel good in different ways'. Thus, when AVT talks about "ideal" affect, it refers to a positive state. It is imaginable that rarely will anyone prefer to feel negatively. Therefore, the term "ideal affect" may not be the most appropriate expression if one is considering a negative affective state. Based on the assumptions and empirical findings of Tsai and her colleagues, however, AVT still provides a comprehensive way to think about the possible mechanism behind why individuals in Chinese cultural contexts may prefer to suppress rather than express and fully experience their emotions, no matter whether these are positive or negative. First, by hypothesising that the actual state of emotion is a response to an event, it can be influenced more by individual characteristics rather than cultural contexts; then, Chinese cultural values might have more impact on the ideal affect state,

which is a socially developed goal of affective states that people learn to favour and strive to attain. As Tsai et al. (2006) proposed, AVT predicts that variation in ideal affect is primarily related to cultural ideas and practices. For instance, in order to adjust to others and suppress oneself from conforming to others, individuals must first suppress their own thoughts and actions, for example by keeping their true thoughts to themselves as a way of letting others express their needs and preferences (Moskowitz, 1994). This coincides partly with what Winnicott proposed as the 'False Self', where 'other people's expectations can become of overriding importance, overlaying or contradicting the original sense of self, the one connected to the very roots of one's being' (Winnicott, quoted in Klein, 1994, p. 241). In this case, it will be very likely that people from a Chinese cultural context might feel the need to tone down the extent of their negative emotion expression in order to avoid having negative influence on the people around them, which may cause a bigger discrepancy when they may, sometimes inevitably, feel actual strong negative emotions and disturbance. This corresponds to the idea that Chinese cultural beliefs emphasise restrained emotions, so the less intense the emotion the better. This value might result in a situation where the gap between a Chinese individual's ideal affect and actual affect is larger. A larger gap between the ideal and actual affect might lead to people feeling even more uncomfortable expressing their true feelings or engaging in emotional disclosure because they realise that what they are feeling is "far" from the ideal state in societal norm terms. Conversely, in a cultural context where emotional control is not that emphasised, individuals might feel more comfortable with emotional disclosure because there is a smaller gap between the ideal and actual emotional states. As a result, in facing emotional distress that is beyond an individual's regular emotional regulatory capacity, it might be more uncomfortable, more stressed and more anxious for individuals in Chinese cultural contexts to consider sharing their actual feelings with strangers like therapists.

There is also empirical evidence suggesting that it is very likely that an individual's habits of expressing and dealing with emotions can play a role in how they view professional psychological help. For example, Vogel and Wester (2003) found that an individual's general concern in terms of disclosing

emotions can predict one's attitudes toward seeking help. Another study investigating the willingness of using psychological services among East Asian immigrants in the United States suggested that unwillingness to reveal affect to others is a negative predictor of East Asian immigrants' willingness to seek psychological services (Barry & Mizrahi, 2005). Similarly, Komiya, Good and Sherrod (2000) found that individuals who are more uncomfortable with emotional disclosure tend to bear less positive attitudes towards counselling no matter their level of distress. The above imply that for individuals with Chinese traditional cultural heritage, who are less comfortable of actively expressing emotions or less used to actively engaging in emotions when facing them, it is very possible to feel more hesitant or resistant to an intensive emotion exploration experience, such as professional psychological help.

2.4 Cultural implications of the stress-coping process: appraising professional psychological help

The above discussion focused on exploring the literature and empirical studies in order to gain an understanding of the attitudes towards seeking professional psychological help and the conceptions regarding mental illness and emotions in Chinese cultural contexts. The distinctive characteristics of Chinese values regarding negative views of mental illness or psychological difficulties and the expression of emotion and emotion regulation were ascertained thoroughly from past research. The aim of probing into the mechanism underlying the under-utilisation of professional psychological help, however, cannot be achieved merely by discussion on this level. Emotional difficulty or distress occur when an individual's emotional states are disturbed beyond their normal range and cannot be soothed or mediated by the usual emotional regulatory processes. Under these circumstances, encountered emotional difficulties become a stressor that needs to be dealt with by the individual, and the individual needs to consider what resources are available and decide on which coping strategy will be attempted. Therefore, in the following section,

the cognitive appraisal stress-coping model, on which cultural schemes including cultural beliefs, values and ideologies may have significant influence, originally proposed by Lazarus and his colleagues (Lazarus, 1966; Lazarus & Folkman, 1984) will be briefly introduced to provide a possible framework to address the issue of the underlying mechanism of seeking professional psychological help in Chinese cultural contexts.

Many contemporary stress theories proposed comprehensive models for the stress process, all emphasising more or less the cognitive interpretations of environmental events (e.g. French, Rogers & Cobb, 1974; Lazarus & Launier, 1978). Nonetheless, Lazarus and Folkman (1984) proposed perhaps the most influential stress-coping model in North American psychology, and have suggested their concern for cultural influences on the stress-coping mechanism in the context where the relationship between the individual and society were emphasised. For instance, when emotional reactions are discussed, they stated that the way emotional responses are ‘expressed and managed hinges on the meaning and significance the culture gives to human transactions with the environment’ (p. 228). As a result, the following discussion will be mainly based on the model developed by Lazarus and his colleagues (Lazarus, 1966; Lazarus & Folkman, 1984). The stress-coping model has been enhanced and refined by other researchers. For example, Taylor and Aspinwall (1996) added the concepts of mediating and moderating in processing psychosocial stress. The mediating process consists of a stressor, appraisal, coping and outcome, while external resources, internal resources and social support act as moderators.

Although being influential in many ways, this stress model has one major limitation. Even though cultural impact was recognised by Lazarus, as presented above, being developed in North America, this model reflects certain “Euro-centric” cultural biases in its basic assumptions (Slavin, Rainer, McCreary & Gowda, 1991). It is impossible, however, not to consider cultural bias in a model that emphasises so much the cognitive appraisal of events. Recognition and discussion of cultural influence should be regarded as fundamental. Hence, Slavin and his colleagues proposed some culture-relevant dimensions as demonstrated in the following.

Lazarus's original model highlights the essentialness of considering culture-embeddedness in thinking of each individual's or specific group of people's experience of stress-coping processes. The original model developed by Lazarus and his colleagues, with an elaborated and expanded cultural perspective enhanced by Slavin and his colleagues (Slavin et al., 1991), as demonstrated in Figure 2.1, consists of five major components: (a) the occurrence of a stressful event, (b) primary cognitive appraisal of the event, (c) secondary cognitive appraisal of the event, (d) the enactment of a coping strategy, and (e) adjustment outcomes. A brief introduction of the content of the concepts of stressor, cognitive appraisal and coping strategy, which are most relevant to the current topic, will be presented in what follows in order to understand the stress experience comprehensively, and to infer the underlying mechanism of how parents in Chinese cultural contexts might react in the face of emotional difficulties or distress.

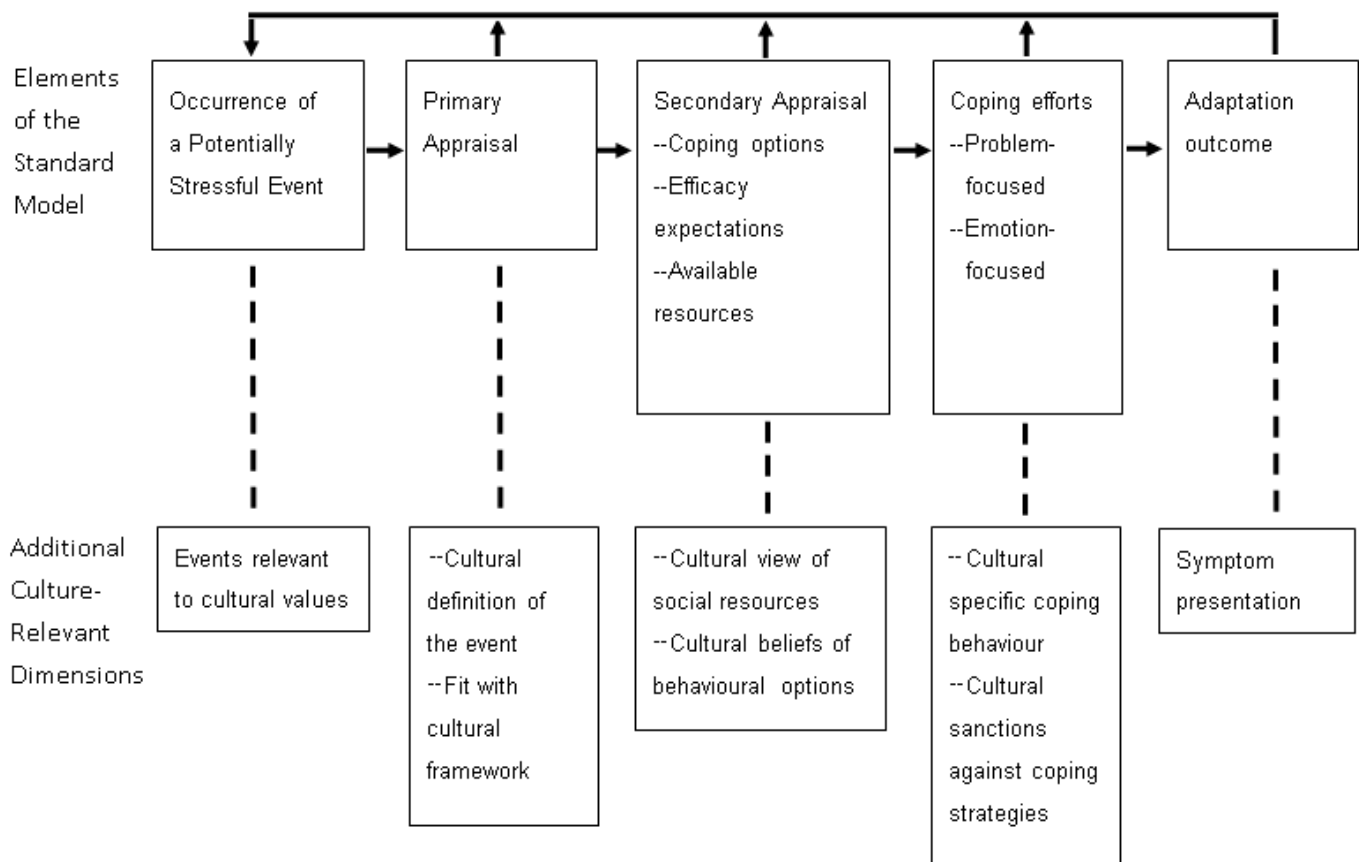


Figure 2.1. Multi-cultural model of the stress process (adapted from Slavin et al., 1991)

Stressor. A stressor is defined as physically or psychologically challenging events or circumstances (Sarafino, 2008). Throughout life, people experience a variety of stressors, which could arise from people themselves, family, school, work, the community and society. Personal career development, divorce, interpersonal conflict, high workload, infectious disease and economic recession are all obvious stressors that people commonly encounter in life. It is quite difficult, however, to conceptualise these stressors objectively. Potential stressful events become stressors only when the person perceives the events as posing demands that exceed his or her current resources. Facing emotional distress beyond an individual's usual regulatory skills can therefore be deemed as a stressor. The phenomenon of

“stress” can be understood as an interactive concept. That is to say, an individual’s cognitive scheme, including his/her cultural values, plays a crucial part in evaluating and appraising the stressors. Individuals with different cultural backgrounds vary in their appraisal processes, their interpretations of events, and their access to relevant resources according to their cultural contexts (Slavin et al., 1991).

Appraisal. A stressor is required for a stressful situation, but does not necessarily cause stress. It is definitely possible that although a person is presented with a certain stressor, that person does not actually feel stressed. The key to interpret the different feeling about the same stressor is how one evaluates it. As proposed by Lazarus (1966), cognitive appraisal is a process through which the person evaluates whether a particular encounter with the environment is relevant to his or her well-being and, if so, in what ways. In his postulation, two kinds of cognitive appraisal exist in the stress process. In primary appraisal, the person evaluates whether he or she has anything at stake in this encounter (Lazarus, 2006).

Nonetheless, an individual always appraises an event through the lens of his or her cultural knowledge and the meanings attached to it (Slavin et al., 1991). As a result, in thinking about how emotional difficulty would be appraised by individuals with Chinese cultural backgrounds, it would be more appropriate to consider the influence of Chinese cultural views and its conceptions about emotions. According to the previous discussion on the AVT framework, a larger gap between ideal and actual affect might exist in Chinese cultural groups; thus, people with Chinese cultural beliefs may devalue their emotional distress because they realise the distance between what they really feel and the ideal state agreed by societal norms. In other words, facing emotional difficulty may be perceived as very threatening by individuals in Chinese societies because it deviates from traditional customs of minimising emotional states. This is also because there is a misfit between the experience and the individual’s cultural scheme for understanding it.

Further, there are three elements in the secondary appraisal. First, a person makes a causal attribution to blame or credit the stressor. Second, possible coping resources and strategies to manage the stressor are evaluated. The person thinks whether there is anything that can be done to overcome or prevent harm or to improve the prospects for benefit after experiencing the stressor. Third, thoughts about future expectations after the stressors are dealt with are generated (Lazarus, 2006).

According to Slavin and his colleagues (Slavin et al., 1991), cultural factors very likely have various effects on an individual's appraisal of coping resources and choices. This possibility results from the idea that every culture has its own view on the proper ways to deal with threatening or challenging events. They also suggested that cultural beliefs affect people's appraisals of the usefulness of specific help-seeking and problem-solving behaviours, while also influencing how people consider specific resources or coping strategies as difficult to adopt. For instance, in Western cultures, acknowledging and exploring emotional states, and sometimes regulating them, are encouraged (e.g. Frattaroli, 2006). Individuals used to these values may consider psychotherapy and counselling, which involve a great amount of exposure and exploration of emotions. Conversely, according to the previous discussion, individuals who uphold Chinese cultural values hold a relatively negative conception of emotions, devalue their expression and emphasise emotional control. Furthermore, my MPhil thesis and past research have indicated that Chinese individuals generally uphold a stigma against mental illness (e.g. Cheon & Chiao, 2012; Furnham & Wong, 2007; Hsu et al., 2008; Ryder et al., 2000; Shokoohi-Yekta & Retish, 1991; Yang, 2007; Yang & Kleinman, 2008; Yang et al., 2013). Seeking help from mental health professionals is very possibly being stigmatised as well due to the association found between stigmatisation and negative views regarding mental illness and negative views of these professionals (e.g. Angermeyer & Dietrich, 2006; Rusch, Angermeyer & Corrigan, 2005; Sirey et al., 2001; Tsang, Tam, Chan & Cheung, 2003). These attitudes can play a part in Chinese individuals' appraisal of whether professional psychological help is an appropriate resource. Finally, different cultural groups can vary in their range of social resources available to an individual. More extensive social resources might be preferred by Chinese individuals because of

the interdependent nature of Chinese cultural values.

Coping. Coping can be defined as the actual efforts an individual makes to manage situations appraised as being stressful (Lazarus & Folkman, 1984). The strategic level of coping could categorise coping according to the focus of coping, the method of coping and so on (Holahan, Moos & Schaefer, 1996). An individual can approach the problem and make active efforts to resolve it, or try to avoid it and focus mainly on managing the emotions associated with it (Holahan et al., 1994). The former is generally known as problem-focused coping while the latter is referred to as emotion-focused coping.

As Slavin and his colleagues (Slavin et al., 1991) stated, studies reflecting preferred or unfavoured coping strategies of a specific cultural group could be fruitful additions to the research on the stress coping mechanisms of that group. Sue and Sue (1990) suggested that Asian-Americans are more likely to present somatic concerns in initial interviews with their counsellors. This may reflect the fact that physical pains or discomfort are considered as more legitimate than psychological complaints. Studies of cultural psychopathology indicate that depressed Chinese patients tend to emphasise and report somatic symptoms, such as pain, dizziness and fatigue, more than psychological ones, like feeling sad (Ryder et al., 2008). The severe stigmatisation of mental disorders in Chinese societies could be one of the reasons why troubled individuals in this context tend to express their problem using somatic manifestations rather than feelings in order to avoid the possibility of being stigmatised (Chung & Wong, 2004). One does not need to be mentally ill to seek professional psychological help, but since the expression of direct and high-intensity emotions, especially negative ones, is not encouraged in the Chinese cultural context, as discussed in previous sections, converting emotional problems into somatic ones is common. In other words, emotional difficulties or distress that are possibly regarded as shameful, unacceptable or inappropriate are converted into physical concerns. Furthermore, symptom presentation characteristics can result from cultural differences in processing and expressing affect (Sayar, Kirmayer & Taillefer, 2003). Symptom presentation can influence decision-making processes in the face of difficulty. It makes sense that people adhering to Chinese ideology consciously or unconsciously manifest their problem in

somatic ways and are then more likely to seek a physician's help rather than a psychologist's. After all, physicians define problems in more "concrete" and "treatable" ways, and use prescriptions and discernible therapeutic methods. Therefore, it is possible that people in this cultural context may convert emotional distress to physical exertion so that they can avoid adopting emotion-focused coping strategies, utilising the problem-focused method instead to fit their cultural schema.

2.5 Gaps identified in the research field

2.5.1 Consideration of Within-Culture Differences

The above discussions about cultural differences regarding views about mental illness and the conception of emotions are mostly based on cross-national studies comparing participants from China, Hong Kong, Taiwan and participants from Western cultures or cross-ethnic comparisons. In spite of the obvious fact that Taiwan, Hong Kong and China are similar in terms of having a common cultural heritage, which can be traced back to ancient China, as time passes, these seemingly similar societies have diverged, each with their own historical, political and economic backgrounds. For instance, as a colony of Great Britain for one hundred and fifty years, Hong Kong is a melting pot of Western and Chinese cultural values (Luk-Fong, 2006). Mixed cultural contexts may reflect the influence of Western values on an individual's endorsement of cultural beliefs. Therefore, even if it is generally accepted that studies conducted in these societies can demonstrate characteristics of Chinese cultural values, a researcher should still be careful in generalising such assumptions. Taking individual differences, in this case within-culture differences, into account is worth considering in attempting to research culture-related issues.

Evidence revealed in cross-cultural studies reminds us of the possibility that even individuals who are assumed to be in the same cultural group still differ in the extent to which they embrace traditional cultural practices and philosophies (Camras, Kolmodin & Chen, 2008; Chan, 2012; Lin & Fu, 1990). Individuals with experience of acculturation also make a good example when considering within-culture

differences. For example, in Camras et al.'s (2008) study investigating the self-reported emotional expression of Chinese, Chinese-American and European-American mothers with 3-year-olds, it was found that Chinese-American mothers' responses for positive emotion expressiveness laid in between the other two groups. The pattern suggests that immigrant Chinese-American mothers may get caught in the complex, transitioning cultural schemes in which traditional Chinese cultural values co-exist with Western American cultural conceptions of emotional expression. Furthermore, the revolution in communication and advancements in technology have forced the world to face the inevitable trend of globalisation. Western values penetrate people's lives in various ways. Especially in the aspect of higher education, most mainstream knowledge and academic research is disseminated from Western or Euro-centric perspectives. It is possible that the higher one's education is, the more they are exposed to Western cultural values and, in turn, the more possible it is that they can endorse different cultural beliefs than completely traditional ones. Empirical research supports this possibility. For example, in studying the relationships between parental beliefs and mothers' self-reported responses to pre-school children's negative emotions in a Chinese sample, Chan (2012) found that the education level of the participating mothers could significantly predict the behavioural approaches they utilised to handle their children's emotions. More specifically, Chinese mothers with a higher educational background appeared to adopt coaching and expression-encouraging approaches in dealing with their children's emotions, more often than mothers with lesser education, who often used an emotion-dismissing approach.

In light of the above discussion, it can be said that individuals from the same traditional cultural heritage can still vary in the extent to which they uphold their traditional cultural values; therefore, within-culture differences are expected. On account of the possibility of oversimplifying an individual's cultural construal, researchers should not assume an individual to be Chinese (culturally) only by the fact that he or she had been consistently exposed to certain cultural ideas and practices in their home environments. In other words, rather than simply assuming that individuals from Chinese cultural societies are collectivistic instead of individualistic, interdependent instead of independent, upholding Confucianism

or not, researchers concerned with cultural issues should actually assess and measure the degree of an individual's adherence to traditional cultural values or beliefs.

2.5.2 Lack of a holistic consideration of the mechanism

As can be seen in the previous discussion, past research has provided some insights and inspirations on how to approach attitudes towards professional psychological help in a Chinese cultural context. It is rare, however, to see research adopting a more holistic view in capturing this phenomenon.

For example, in studies investigating cross-cultural differences regarding attitudes towards professional help, there is a rising trend in research utilising samples with Asian cultural background that the researcher assesses actual Asian cultural values or the extent of acculturation in societies consisting of a large proportion of immigrants, like the United States (e.g. Leong, Kim & Gupta, 2011; Chang & Chang, 2004). There are not a lot of studies, however, that assess individuals' cultural values in a more specific Chinese cultural context. In my search, I only found Yeh's (2002) study and one unpublished dissertation written by Tieu (2013), which researched the attitudes towards professional psychological help in the Chinese cultural context directly measuring cultural values in their analyses.

Even in cases where studies attempt to identify an individual's extent of adherence to Asian or Chinese cultural values, for example by accessing their degree of acculturation, they often consider the direct impact of acculturation or enculturation on their attitudes towards seeking professional psychological help (e.g. Zhang & Dixon, 2003; Miller, Yang, Hui, Choi & Lim, 2011; Kim, 2007). This means that the majority of these studies mostly do not examine various constructs that may have a more direct impact on an individual's views or attitudes towards professional psychological help-seeking. Based on my review of the literature and my attempt to adopt a more pragmatic way of approaching the problem of under-utilisation of professional psychological help, it is more likely that cultural values may influence attitudes towards professional psychological help through the formation of other potential fears or barriers.

In short, in related fields of research regarding the attitudes towards professional psychological

help in a Chinese cultural context, works that take into account the assessment of cultural values often omit their connection to constructs that can bridge cultural values and attitudes towards professional psychological help. Conversely, research that touches on relevant predictors, such as stigmatisation of mental illness, often omits the necessity of assessing an individual's adherence to cultural values.

The current study, therefore, aims to put together the various insights drawn from the literature, and begin to unveil the phenomenon of the under-utilisation of professional psychological help in Taiwanese society. Hence, possible underlying mechanisms are proposed in the next section based on the theoretical and empirical grounds mentioned above in order to investigate the development of Taiwanese mothers' attitudes towards seeking professional psychological help in the Chinese cultural context.

2.6 My Conceptual Framework and Research Questions

2.6.1 The current research

In light of the aspiration of enhancing parents and children's mental health in Taiwan, understanding attitudes towards professional psychological help among Taiwanese mothers of the current generation is important, since their attitudes may determine whether themselves and their children can receive related help. Here, by professional psychological help I mean psychotherapy or counselling, namely resources provided by professionals who specialise in assisting individuals who face psychological distress with an emphasis on dealing with psychological aspects, such as moods, feelings, thoughts and behaviours. The present study aims to investigate attitudes towards seeking professional psychological help among Taiwanese mothers of the current generation and their underlying mechanisms, particularly the role played by Chinese cultural values. According to the literature review presented above, past research has shown that Chinese cultural and social values are related to individuals' reluctance and unwillingness to seek professional psychological help, including psychotherapy and counselling (e.g. Kung, 2003; Ma et al., 2010; Soong, 1998). This relationship between Chinese cultural values and an

individual's attitudes towards seeking professional psychological help may be further explained and understood through several underlying mechanisms. On the one hand, Chinese culture's unique perspectives on emotion expressivity and habits of dealing with emotions using ways such as suppression may be associated with the reluctance of disclosing personal feelings to psychology professionals (Camras et al., 2006; Cheah & Rubin, 2003; Davis et al., 2012; Eid & Diener, 2001), and in turn contribute to further hesitancy towards seeking such help. On the other hand, mental illness and psychological difficulties are often more severely stigmatised in Chinese cultural contexts (e.g. Cheon & Chiao, 2012; Furnham & Wong, 2007; Hsu et al., 2008; Yang, 2007; Yang & Kleinman, 2008). Furthermore, a person's intention or action of seeking psychotherapy and counselling implies the possibility that this individual has psychological problems. Consequently, these intentions or actions are more likely to be resisted or even stigmatised in Chinese societies.

Building on past theories and empirical studies, the current study proposes a possible framework that can help understand the relationship between Chinese cultural values and attitudes towards professional psychological help and its underlying mechanisms in current Taiwanese society (see Figure 2.2).

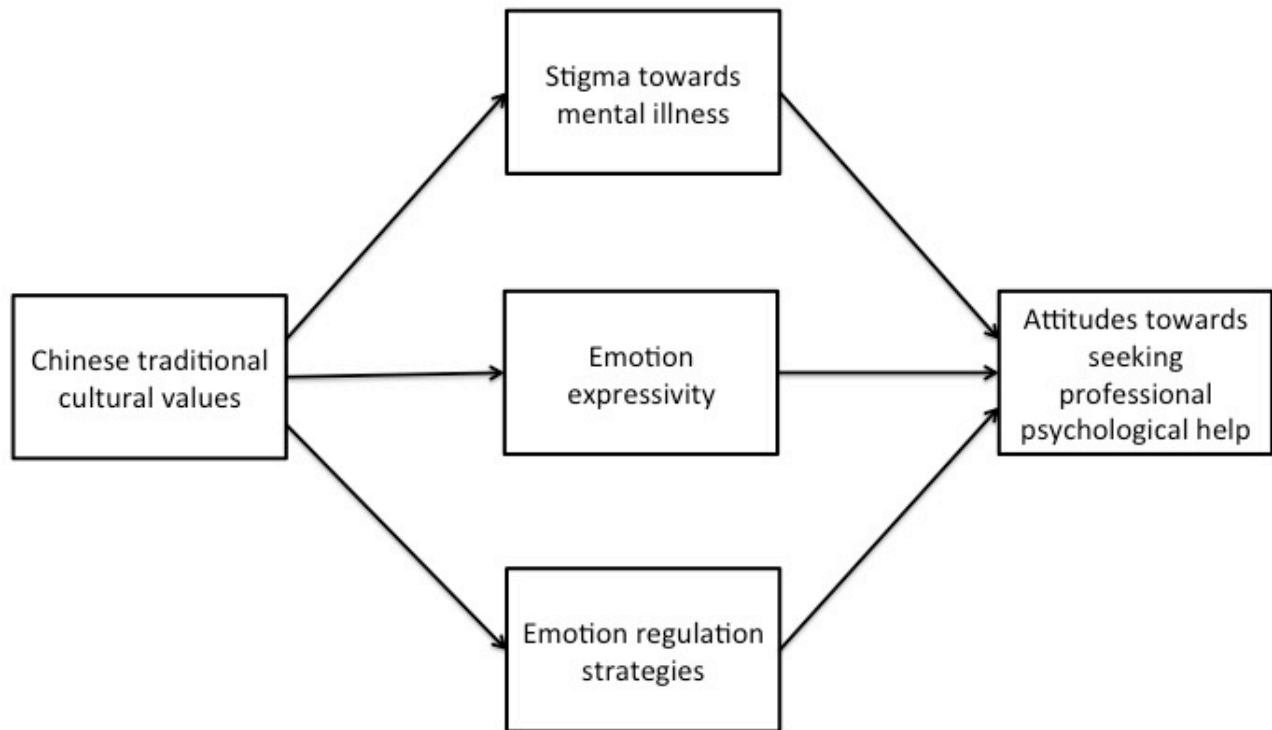


Figure 2.2. Conceptual framework of the current project

2.6.2 Research questions

Through the examination of the following proposed research questions, the mechanisms of how Chinese cultural values can have an impact on the development of attitudes towards psychotherapy and counselling can start to be unveiled. Research questions relevant to the aim of the current study can be divided into two parts as shown below. These questions will be examined in two phases, followed by a final integrative interpretation of both sets of data and results.

A) Phase one primary research question:

How may Chinese cultural values shape the attitudes towards professional psychological help among Taiwanese mothers?

(More specific secondary research questions and hypotheses for this particular phase are presented in Table 2.1)

B) Phase two primary research question:

Why may attitudes towards professional psychological help be related to the proposed constructs?

This will be approached with the following secondary research questions:

- i) What are Taiwanese mothers' views on the concepts of the conceptual framework (see Figure 2.2) according to their own experience and background?
- ii) How do they subjectively perceive and interpret the relationships between these constructs?

Answers to these questions can be crucial because it is important to assess the resources individuals in different cultural contexts have available to them in order to enhance their mental health. Researchers and practitioners must be aware of traditional coping resources used by a particular cultural group and help its members appreciate the possible usefulness of such resources. The exploration of coping mechanisms allows practitioners and researchers to target more specific aspects of psychoeducation or advertisement, which may advocate the adoption of professional psychological help as a coping strategy whenever necessary and appropriate. This can eventually promote the utilisation of psychotherapy and counselling that are potentially beneficial to parents and children's psychological well-being. The ultimate goal of this project is to facilitate parents in need or parents with children in need to overcome psychological barriers in considering the availability and usefulness of professional psychological support.

Table 2.1. *Research questions and hypotheses for Phase One*

Secondary research questions	Variables involved	Hypotheses
Do Taiwanese mothers' Chinese cultural values affect their attitudes towards seeking professional psychological help through the stigmatisation of mental illness and psychological difficulty?	– Chinese cultural values – Attitudes towards seeking professional psychological help	Individuals with more deeply entrenched Chinese traditional cultural values may hold more negative attitudes towards seeking professional psychological help
	– Chinese cultural values – Stigmatisation of mental illness and psychological difficulty	Individuals with more deeply entrenched Chinese traditional cultural values may stigmatise psychological problems to a larger extent
	– Stigmatisation of mental illness and psychological difficulty – Attitudes towards seeking professional psychological help	Taiwanese mothers endorsing the stigmatisation of psychological problems may hold more negative attitudes towards seeking professional psychological help
	– Chinese cultural values – Stigmatisation of mental illness – Attitudes towards seeking psychological help	The extent of stigmatisation of mental illness and psychological difficulty can mediate the influence of Chinese cultural values on attitudes towards seeking psychological help
Do Taiwanese mothers' Chinese cultural values affect their attitudes towards seeking professional psychological help through their conception about emotions?	– Chinese cultural values – Conceptions about emotions	Individuals with more deeply entrenched Chinese traditional cultural values may prefer low emotion expressivity
		Individuals with more deeply entrenched Chinese traditional cultural values may prefer emotion regulatory strategies that involve inhibition or disengagement
	– Conceptions about emotions – Attitudes towards seeking professional psychological help	Individuals who prefer low emotion expressivity are more likely to view seeking professional psychological help more negatively
		Individuals who prefer emotion regulatory strategies that involve inhibition or disengagement may view seeking professional psychological help more negatively
	– Chinese cultural values – Conceptions about emotions – Attitudes towards seeking professional psychological help	Preference of emotion expressivity can mediate the influence of Chinese cultural values on attitudes towards psychotherapy and counselling
		Preference of emotion regulatory strategies can mediate the influence of Chinese cultural values on attitudes towards psychotherapy and counselling

Chapter 3. Mixed Methods Approach

Searching for a suitable way of approaching my research questions, I settled on the mixed methods approach, as it provides a pragmatic way of thinking by integrating both qualitative and quantitative methods. In an early definition of mixed methods research, Greene, Caracelli and Graham (1989) pointed to the possibility of the mixing:

“We defined mixed-method designs as those that include at least one quantitative method (designed to collect numbers) and one qualitative method (designed to collect words), where neither type of method is inherently linked to any particular inquiry paradigm. (p. 256)”

The definition evolved from merely mixing two methods to integrating them in all phases of the research process, including mixing philosophical (i.e. worldview) positions, inferences and the interpretations of results using both qualitative and quantitative methods in a single study or a series of inquiries – namely, a methodological orientation (Tashakkori & Creswell, 2007; Tashakkori & Teddlie, 1998; Tashakkori & Teddlie, 2003). According to Johnson, Onwuegbuzie and Turner (2007)’s synthesis of 19 definitions:

“Mixed methods research is the type of research in which a researcher or team of researchers combines elements of qualitative and quantitative research approaches (e.g. use of qualitative and quantitative viewpoints, data collection, analysis, inference techniques) for the broad purposes of breadth and depth of understanding and corroboration. (p. 123)”

Mixed methods research is a type of methodology that guides the research design by making pragmatism assumptions (Tashakkori & Teddlie, 2003). It also integrates both qualitative and quantitative data in the research process in order to achieve the most understanding of the topic of interest. As an approach, it provides a framework of collecting and analysing both quantitative and qualitative data in a single study or series of studies. The core premise of this approach is that by adopting both quantitative and qualitative perspectives, in unison, a better understanding of the

research problems can be achieved than by either approach alone (Creswell & Plano Clark, 2011).

Creswell and Plano Clark (2011) proposed several core characteristics and components describing mixed methods research. When conducting mixed methods research, the researcher (a) collects and analyses both qualitative and quantitative data; (b) mixes (or integrates or links) the two forms of data concurrently by combining them, sequentially by having one build on the other, or embedding one within the other; (c) gives priority to one or to both forms of data; (d) uses these procedures in a single study or in multiple phases of a program of study; (e) frames these procedures within philosophical worldviews and theoretical lenses; and (f) combines the procedures into specific research designs that direct the plan for conducting the study.

The above brief introduction of the mixed methods approach introduces how it corresponds with the current project's purpose. This study aims to provide both an in-depth and holistic view of the relationship between Chinese cultural values and the attitudes towards professional psychological help among Taiwanese mothers. In order to a better understanding, the first aim is to examine the underlying interrelations between the adherence to traditional Chinese cultural values, possible contributing factors, and attitudes towards professional psychological help. A further aim is to explore the rationales behind these relationships through finding out what each possible relevant construct, as proposed in the conceptual framework, means to Taiwanese mothers, and how do Taiwanese mothers view the relationships between these concepts. Using a mixed methods approach, a more complete understanding of the research questions proposed can be developed through integrating the findings from both qualitative and quantitative methods.

The following discussion will touch upon why and how the mixed methods approach was adopted for the present project, through a more detailed discussion of the philosophical stance (i.e. worldview), actual research design, ethical principles and research quality assurance inherent in using the mixed methods approach in the current study.

3.1 Philosophy

It has been well recognised that human experiences are complex and very likely subject to multiple realities. In these circumstances, when conducting research regarding the human experience, both qualitative and quantitative methods seem to have their own strengths, while neither can be considered superior to the other. The utilisation of qualitative data prevails when the researcher aims to explore a phenomenon, extract subjective experience from the participants, map the complexity of the situation, and investigate participants' perspectives in great depth. It is considered, however, as deficient most often because of the inevitable bias created by the subjective interpretations made by the researcher and the difficulty in generalising findings to the population. Conversely, quantitative data is prevalent when the researcher seeks to examine the clear relationship between variables and compare different groups. Nevertheless, mere dependence on quantitative data is weak when it comes to taking into account the context in which people live in, and may neglect individual differences or fail to collect important information that can never be grasped entirely through questionnaires or experimental tasks. In sum, qualitative and quantitative data provide different perspectives, but each has its limitations. For the current project, the ultimate goal of the research is to develop deeper levels of explanation and understanding of the phenomena of interest and I am, thus, comfortable with all forms of methodological triangulation that are in line with this goal. This is very similar to the worldview advocated by pragmatism, which emphasises the use of multiple and pluralistic approaches to derive knowledge about the research problems in question (Creswell, 2014). Pragmatism provides a philosophical framework that emphasises “what works.” It allows multiple ideas to be combined and values both objective and subjective knowledge. Pragmatism considers that knowledge can be obtained by both deductive and inductive thinking. It views the nature of reality as both singular and multiple, because a theory can be adopted to explain a phenomenon, just as well as varied individual inputs (Creswell, 2014). I view qualitative and quantitative methods as compatible ways of research. Here, a potential problem has been identified (the under-utilisation of and reluctance to use professional psychological help in Taiwan). In order to find out more about its underlying mechanisms, I believe that making the most of multiple methods is most suitable for the development of a better

understanding of the issue at this stage. That is, there are times, such as in the current study, when research problems are best examined by simultaneously or sequentially combining multiple mental models and employing different methods to incorporate the strengths and balance the weaknesses of different methodologies. The mixed methods approach provides a way for this to be achieved.

3.2 Research design

According to the above discussion, a two-phased explanatory sequential mixed methods design (as shown in Figure 3.1) is adopted in order to approach how Taiwanese mothers with a Chinese cultural inheritance view professional psychological help and the possible mechanisms underlying the formation of their attitudes. It is considered the optimum design because by collecting and analysing both quantitative and qualitative data, the current project can triangulate, validate and corroborate the two forms of data to bring greater insight into the problem than would be obtained by either type of data separately. It is consistent with the aim of the current study to understand holistically the formation of attitudes towards seeking professional psychological help among Taiwanese mothers. As Greene (2007) illustrated:

[the mixed methods design] invites us to participate in a dialogue about multiple ways of seeing and hearing, multiple ways of making sense of the social world, and multiple standpoints on what is important and to be valued and cherished. (p. 20)

In this project, a survey using online questionnaires was used in the first phase to test the proposed conceptual framework that illustrates how Chinese cultural values may impact on Taiwanese mothers' attitudes towards psychological help through their views about emotion expressivity, emotion regulation and mental difficulties. The qualitative data through interviews in the second phase then helped corroborate and explained the mechanisms further through an attempt to understand Taiwanese mothers' subjective experience of each construct and their relationship.

The two phases in the current study are given equal weight, as they play an equally important role in addressing the research problem. Both quantitative and qualitative data in the current project provide a complementary view towards developing a more complete understanding of underlying mechanisms. The first phase, namely the quantitative phase, uncovers how the proposed relevant constructs may be related to one another. The relationships found between variables in the first phase can then be expanded, validated and explained in greater detail through the qualitative interviews in the second phase. That is, both the how and the why are important for the current project in order to obtain a better understanding of the phenomena of interest, and quantitative and qualitative methods provide answers to the how and why respectively. While the quantitative statistical results first provide evidence of the trend of relationships between variables that can be generalised, the in-depth qualitative interviews in the second phase then fill in the nuances behind why these variables may be related to one another. The obtained quantitative results can be explained in more detail because of the ability of qualitative methods to facilitate the unfolding of participants' voice and perspectives on their subjective experiences. In the final cumulative interpretation of the results yielded from the integration of two phases, these are converged to form validated, triangulated conclusions about the present research problem.

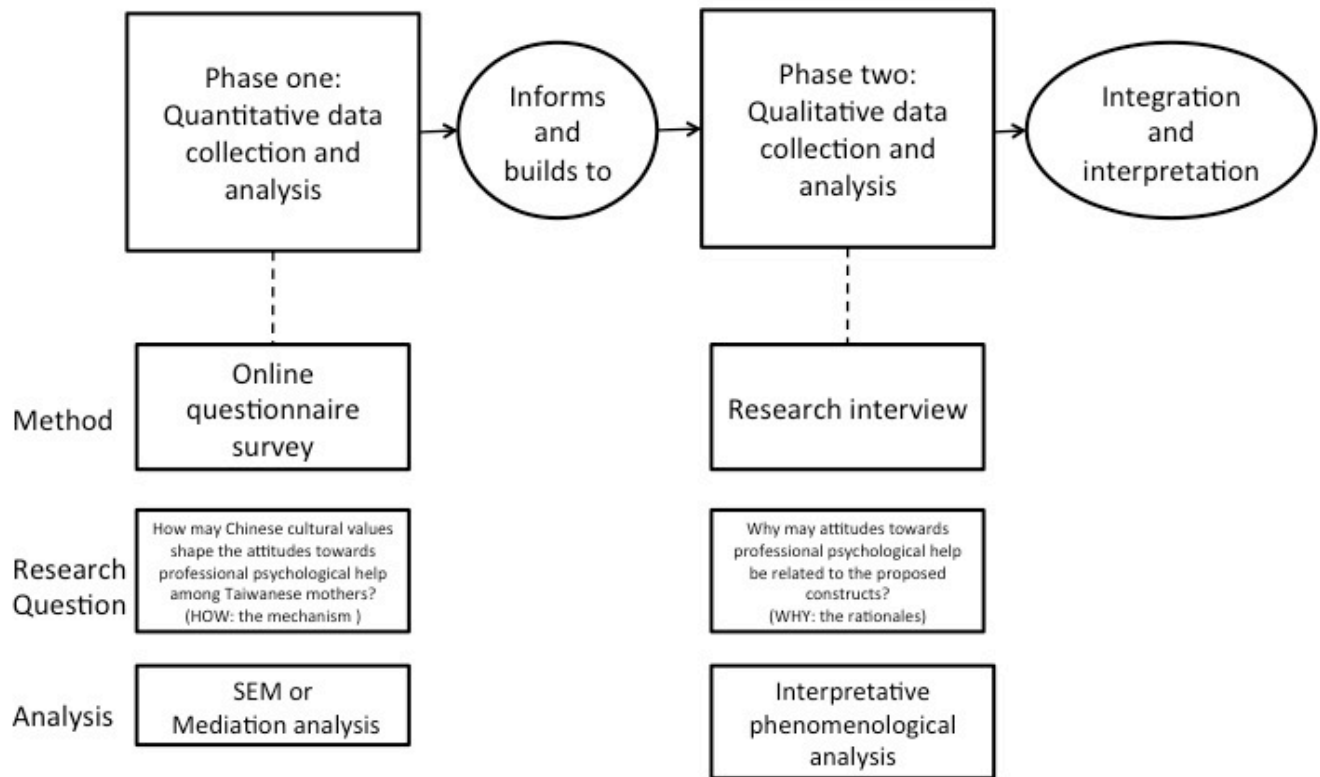


Figure 3.1. Explanatory sequential research design diagram

3.3 Principles and practices of research quality assurance

Research quality was ensured through careful and reflective thinking throughout the research process. The main issues of reliability and validity are important in discussing research quality and, in my case, they were manifested mainly in Phase one where several quantitative measurements were involved. Research quality was ensured through the careful selection of instruments before administration. I made the effort to warrant that all instruments are equipped with good reliability and validity and furthermore, if possible, that they are fitting to the local characteristics of Taiwanese society in order to ensure the quality of the assessment. Should the instruments need to be translated, the back translation technique with assistance from a bilingual fluent in both Mandarin and English were to be adopted to ensure the quality of the translation and the appropriateness of using this measure in the current study. At the administration stage, where the participants actually respond to the questionnaires, it was made sure that all instructions and statements are made clear to them and that they are easy for them to respond to. This can prevent the possibility of loss of data due to unclear or user-unfriendly settings. The applicability of the current chosen instruments, including reliability tests, were examined first before any further analysis of the data. For phase two of the current study, the concepts of validity and reliability are relatively not a good fit. Instead, research quality of this form of inquiry was obtained through an attempt to maintain data trustworthiness. Credibility is a key component in achieving trustworthiness. This was realised through adequate engagement prior to and during the research. Furthermore, credibility can also be approached by triangulating the collection of data from different sources. The mixed-method design adopted by the current study provides a way of approaching this in the final integration stage, where the data sets from both phases can corroborate one another. Trustworthiness also consists of transferability, which means showing that the findings can be applied to other contexts. This was done by reporting and explaining in detail the phenomenon of interest, so that one can evaluate the extent to which the claims of the current study are transferable to other contexts. Trustworthiness also involves establishing confirmability, which is being aware of the importance that the findings of a study are mainly shaped by the participants and not biased by the

researcher's motivation or interests. This demonstrates that self-reflexivity is important in working towards completing a quality research project. Especially for the second phase of this study, awareness of the subjectivity of the researcher is an integral part of the research process, as it may impact on research design, data generation and analyses. During the research interviews, the researchers are active co-producers of knowledge and, therefore, are required to be reflexive and critically aware of their own experiences (King & Horrocks, 2010). According to Ryen (2001), interviewers' thinking and decisions during interviews are subjective to their own experiences and can actively contribute to the shaping of the research process. Johnson (2001) suggests that in conducting research interviews, researchers must undertake considerable self-reflection and observe themselves self-consciously in interaction with others because of the great involvement of the interviewer during the process. Owing to the great involvement of the researcher's self in the interview process, Johnson (2001) suggests that the content interviewers pick up from their informants sometimes conforms only to the extent of what their own intellectual or ethical development has prepared them for. One's subjective preconceptions and knowledge shaped by his or her own experiences, however, are not necessarily conscious. Thus, reflexive practices are especially required during the interpretative research process. Personally, I strove to be gain my awareness and to recognise and acknowledge my own attitudes and beliefs regarding the issue I am investigating. I acknowledge that I hold very positive attitudes towards professional psychological help and I am very motivated to promote the utilisation of such services in Taiwan or even in a broader sense to other Chinese cultural communities. Therefore, extra caution was applied when striving for reflexivity in order to prevent bias. For example, in order to avoid accidentally imposing my own biases, I reminded myself to be aware of and to reflect on my own beliefs in receiving opinions that are contradictory to mine, and focus on exploring the participants' experience. I have been constantly reflecting on my own thoughts and reminding myself to be open and respectful to my participants' subjective experience during the interview and the analysis process.

3.4 Ethical considerations

In order to avoid unethical research practices, the current study went through the process of ethical approval by the Faculty of Education at the University of Cambridge. In preparation for this examination, I reviewed the ethical guidelines constructed by the BACP (British Association for Counselling and Psychotherapy), the BERA (British Educational Research Association) and the BPS (British Psychological Society) in order to avoid designing a research process that may be deemed as unethical. The primary principle suggested in the BERA and BPS's ethical guidelines is that all research should be conducted with respect for the person, denoting the researcher's respect for the autonomy, privacy and dignity of participants, bearing in mind that all actions should aim at maximising benefit and minimising harm; and, for knowledge and research quality, where the researcher should strive for scientific integrity, making every effort to ensure the quality of the research. In addition to this, I also particularly reviewed the BACP principles, since they also inform research in the counselling discipline. BACP listed the following ethical principles informing both practice and research in the counselling discipline. The primary principles to upholding ethical practice and research in the counselling discipline include: being trustworthy to the participants, respecting autonomy, bearing beneficence in heart and committing to promoting well-being, insisting on non-maleficence and committing to avoiding harm, upholding justice and being fair to all, having self-respect and fostering our own self-knowledge, integrity and care for self.

In applying these principles to the current study, attention was paid to ethical issues at all stages of the research. The following are the ethical considerations in the different phases of my research.

Prior to conducting the study, as mentioned in the previous section, I examined the professional associations' standard of ethics by consulting the ethics guidelines of BERA, BACP and BPS. Following that, I discussed the ethical considerations with my supervisors to overrule any oversight. In order to seek faculty/university approval, the risk and ethics checklist was submitted to the Faculty committee to gain expert approval. At the beginning of the study, a research topic that was potentially beneficial to the participants was identified, as the current study may enlarge the strategy

pool for individuals facing emotional difficulties in Taiwan in the future, by raising awareness regarding the usefulness of seeking professional psychological help. Recruitment ads, invitations and consent forms were provided prior to collecting the data with a clear disclosure of the purpose of the study, while the participants were given full liberty to decide whether to participate or not. Also, the right of withdrawal at any time was stressed clearly in the consent form. During the data collection phase, a slight disruption of the participants' routine is inevitable; therefore, acknowledgement of any possible disruption was related in order to demonstrate my awareness of any inconvenience. At the data analysis stage, I strove to report all perspectives in their entirety in order to avoid bias. I was also open to, prepared for and expected contrary findings. Confidentiality was made a priority through the promise of anonymity in any further analysis and reporting of my project.

Generally speaking, it was very unlikely for the current research to cause any harm to the participants, but it was borne in mind that the investigation involves mothers thinking about emotional experiences, emotional difficulties and professional psychological help, which can all be sensitive issues to some people, especially in Taiwanese society. As a researcher, I tried to be aware of how a sensitive interview interaction may be stressful for the participants. Being an attentive listener is important during the process, and supporting measures like providing access to relevant resources was prepared in advance. It is also worth noting that the power asymmetry of a research interview may be evident during the interviews (Kvale & Brinkman, 2009; Rubin & Rubin, 2012). The nature of the relationship between the interviewer and the interviewee poses ethical obligations to the researcher. Therefore, it is important when conducting interviews to bear in mind this potential sense of power asymmetry, and further develop ethical ways to prevent it from obstructing the aim of the interview. Furthermore, as discussed above, research interviews involve processes of social production of knowledge, where through the interview process and its interpretation by the researcher, they and the participants produce knowledge inter-subjectively and socially. Especially pertinent to Phase two, intense interaction between the researcher and the participants was involved during data collection, while close exchange of experiences in interpreting and analysing the interview data was also present. Phase one, though being a more objective way of collecting and analysing data, still involved

subjectivity in designing the research and choosing, developing or translating relevant measures in the Taiwanese cultural context. Reviews of ethical guidelines constructed by the BACP, the BERA and the BPS also suggest the essentialness for researchers and practitioners to respect cultural diversity and demonstrate cultural sensitivity and appropriateness. In sum, as the present is a study particularly involving cultural issues, it cannot take place without the input of subjectivity, including but not limited to the cultural backgrounds and other personal beliefs of both the researcher and the participants. Therefore, the necessity to develop cultural competence in the current research served two purposes: first, maximising the quality of the research and, second, facilitating the upholding of ethical principles in conducting research. Researchers need to be reflexive throughout their research because their own values, perceptions, behaviours or presence, and those of the respondents, can affect the research process (Lee & Zaharalick, 2013; Parahoo, 2006). Therefore, upholding the consideration for reflexivity and cultural competence is not only critical in terms of methodology but also in terms of ethics.

Chapter 4. Phase One:

The Underlying Mechanisms between Chinese Cultural Values and Attitudes towards Seeking Professional Psychological Help

Phase one aimed at establishing knowledge regarding the mechanisms underlying the influence of cultural values on attitudes towards seeking professional psychological help, and whether this could be generalised to the population of Taiwanese mothers of the current generation. In Phase one, a quantitative mindset was adopted in order to examine the relationships between variables of interest by conducting statistical tests on a larger sample. The constructs demonstrated in Figure 2.2 (p. 41) are measured by the appropriate existing instruments listed in Table 4.1. The complete online questionnaire will be attached and presented in the appendices. The selection of each instrument was based on the expectation of maintaining sensitivity to the cultural contexts of the participants. Therefore, indigenously developed and adapted measures were preferred during the selection process. The hypothesised mechanisms were to be tested through Structural Equation Modelling (SEM) or condition process modelling.

Table 4.1. *Measurements adopted in Phase one*

Constructs	Method type	Measurements	Authors	Brief introduction
Traditional Chinese cultural values	Questionnaire survey	Chinese Individual Traditionality Scale	Kao & Lu (2006)	15 items 6-point Likert's scale (1 = strongly disagree, 6 = strongly agree) Higher scores represent more traditional Chinese cultural values
Stigmatisation of mental illness and distress	Questionnaire survey	Attitudes Toward Mental Illness Scale	Zeng et al. (2009)	26 items 5-point Likert's scale (0 = strongly disagree, 4 = strongly agree) Higher scores represent higher extent of stigmatisation
Emotion expressivity	Questionnaire survey	Berkeley Expressivity Questionnaire (BEQ)	Gross & John (1997) adapted by Zhao et al., (2015)	16 items 7-point Likert's scale (1 = strongly disagree, 7 = strongly agree)
Emotion regulation strategy	Questionnaire survey	Emotion Regulation Questionnaire (ERQ)	Gross & John (2003) adapted by Li (2004)	12 items 7-point Likert's scale (1 = strongly disagree, 7 = strongly agree)
Attitudes towards seeking professional psychological help	Questionnaire survey	Inventory of Attitudes toward Seeking Mental Health Services	Mackenzie et al. (2004) adapted by Wu (2010)	25 items 5-point Likert's scale (0 = disagree, 4 = agree) Higher scores represent more positive attitudes

4.1 Methods

4.1.1 Questionnaires

4.1.1.1 Traditional Chinese Cultural Values.

The short-form of Chinese Individual Traditionality Scale adapted by Kao and Lu (2006) from the original Multidimensional Scale of Chinese Individual Traditionality (Yang, Yu & Yeh, 1991) is used to assess the extent to which each Taiwanese mother upholds traditional Chinese cultural values. The total score will represent how much each individual adheres to Chinese cultural beliefs. The Chinese Individual Traditionality Scale has been developed in Mandarin and, therefore, no further translation or adaptation will be needed in the Taiwanese societal context. This is a 15-item questionnaire with 5 subscales (compliance to authority; filial piety and respect for ancestors; conservatism; fatalism and self-protection; male dominance). Sample items include “complying to authority and respecting elders is a virtue that every child should learn.” It uses a 6-point Likert’s scale, with 1 representing strongly disagree and 6 representing strongly agree to the item statement. Kao and Lu (2006) examined the reliability and validity characteristics of the short-form of Chinese Individual Traditionality Scale in a Taiwanese sample. It showed good internal consistency (Cronbach $\alpha = .81$) and further item analysis suggested significant item-total correlations item discrimination. Furthermore, its ability to demonstrate differences in traditionality in diverse groups by demographics such as age, gender and education background showed that it has discriminant validity. Therefore, the short-form of Chinese Individual Traditionality Scale is an indigenous instrument with qualified reliability and validity to assess Chinese cultural values in individuals.

4.1.1.2 Attitudes towards seeking professional psychological help.

Mackenzie et al. developed the Inventory of Attitudes Toward Seeking Mental Health Services (IASMHS) in 2004, which was later translated and adapted into Mandarin by Wu (2010) in his Master’s thesis, according to the cultural contexts in Taiwan. The IASMHS is a 25-item scale assessing mental health help-seeking attitudes, and the responses are measured on a 5-point Likert’s

scale (0 = *disagree* to 4 = *agree*) with higher total scores indicating more positive attitudes towards professional mental health help. There are three subscales in the IASMHS: a) psychological openness, b) help-seeking propensity (higher scores represent stronger help-seeking propensity) and c) indifference to stigma (lower scores represent indifference; higher scores represent fear of stigma). Sample items include "I would want to get professional help if I were worried or upset for a long period of time," and "I would be embarrassed if my neighbor saw me going into the office of a professional who deals with psychological problems." The internal consistency of the entire scale and respective subscales is acceptable in the Taiwanese sample according to Atkinson (2007), Loo, Oei & Raylu (2011) and Wu (2010). Wu's adapted version was adopted in the current study has shown to have good reliability in terms of internal consistency and test-retest reliability. The Cronbach's α is .87 for the entire scale, and for the subscales, Cronbach's α ranges from .76 to .82 (Wu, 2010). Test-retest reliability is .85 for the entire scale and ranges from .64 to .91 for the subscales in the same study. The IASMHS also reported good validity as studies demonstrated that gender and ethnicity can differentiate individuals' attitudes towards seeking professional psychological help using the IASMHS and its stable three-factor structure (Atkinson, 2007; Wu, 2010).

4.1.1.3 Emotional regulatory strategies.

In order to discover what kind of strategies are preferred by the participants, the Emotion Regulation Questionnaire (ERQ) developed by Gross and John (2003) is adopted. ERQ is designed to assess individual differences in the habits of using two different forms of emotion regulation strategies: cognitive reappraisal and expressive suppression. This corresponds to what is of interest in this thesis (the differences between engagement and disengagement in emotion regulation, and whether to restrain and control one's emotion) according to the earlier literature review. ERQ was translated and adapted by Li (2004) in his Master's dissertation to be adopted in Taiwan and also to fit the Taiwanese context better. The adapted version consisted of three subscales and two additional items representing three forms of regulation strategies: reappraisal, suppression and stay calm according to Li's findings from both exploratory factor analysis and confirmatory factor analysis. The scaling of the adapted ERQ is a 4-point Likert's scale, with 1 representing *strongly disagree* and 4 representing *strongly agree*.

Sample items include “I control my emotions by not expressing them.” The higher score of the specific subscale represents the individual’s tendency to choose that strategy in the emotion regulation process. It has been tested to have acceptable internal consistency as a reliability index in Li’s study using a student sample in Taiwan (Cronbach’s α is .79 for Cognitive reappraisal, .66 for Suppression and .72 for Stay Calm). The ERQ has also been shown to be able to demonstrate that male students adopted the Suppression emotional regulation strategy more often than female students, and not-potentially depressed graduate students adopted more Reappraisal and Stay calm strategies than potentially depressed graduate student in one study conducted in Taiwan (Hsu, 2013).

4.1.1.4 Emotional expressivity.

Emotional expressivity was measured by the Berkeley Expressivity Questionnaire (BEQ), developed by Gross and John in 1997, and later translated and adapted into Mandarin according to Chinese cultural background and language expression habits (Zhao, Zhang, Zhou & Ding, 2015). It contains 16 items in the form of short sentences, and measures the control of one's emotional impulses and the expression of positive and negative emotions. It is a 7-point Likert’s scale, with 1 indicating *strongly disagree* and 7 *strongly agree*. Sample items include “It is difficult for me to hide my fear.” The coefficients of internal consistency have been suggested to be acceptable on the American and Chinese-American sample (Gross & John, 1997; Tsai, Levenson & Carstensen, 2000) and in a Chinese sample (Cronbach’s $\alpha = .77$ in Zhao et al., 2015). In the same study, the Chinese version of BEQ also demonstrated good test-retest reliability and criterion validity, as it significantly correlates with other measures of emotions (Zhao et al., 2015). As the Chinese version of BEQ adopted is translated in China, minor adjustments in the use of Mandarin in each item were made to adapt to the language expression habits in Taiwan.

4.1.1.5 Stigma towards mental illness.

The Attitudes Toward Mental Illness Scale (ATMIS; Zeng, He, Tain, Miu & Yu, 2009) is used to assess stigma towards mental illness in the Chinese cultural context. The scale includes 26 items divided into three subscales, assessing desire for social distance, attributions of danger and

perceived competence. In order to respond to each item, participants rate on a 5-point Likert's scale ranging from *strongly disagree* (0) to *strongly agree* (4). Higher scores suggest more stigmatising attitudes. Sample items include "many individuals with mental illness commit crimes," and "individuals with mental illness cannot live independently." It is found to have three factors according to the exploratory factor analysis in Zeng and her colleagues' study. In addition, its ability to differentiate the extent of stigmatization between different groups of individuals according to their familiarity and contact frequency to individuals with mental illness in a Chinese sample also suggests adequate validity of the ATMIS (Zeng et al., 2009). In the same sample, the Cronbach's α is .89 for the entire scale, and for the subscales, Cronbach's α ranges from .49 to .83 (Zeng et al., 2009). This scale was developed in Chinese contexts; therefore, translation was not required. Yet, minor adjustments in the use of Mandarin in each item were made to account for the slight differences in the language used in Taiwan and in China.

4.1.2 Participants.

In Phase one, participants were recruited through purposive sampling. This means that I looked for participants with certain characteristics. The primary criterion for participating in Phase one is that the participants are mothers with children less than 18 years old. Other demographic characteristics, which may contribute to differences in the constructs of the current research conceptual framework will be analysed and controlled through statistical methods.

At least 600 participants were needed in order to ensure maximal representation of the population in structural equation modelling analyses according to expert recommendations (Schumacker & Lomax, 2004; Tabachnick & Fidell, 2007) and the discussion with my advisor in my registration viva. This is an evidently large sample size. Hence, resources such as Cooperated Pediatric Clinics, kindergartens, nursing facilities and postnatal care centres were asked with an invitation letter (Both the original Mandarin version and the translated English version are attached in Appendix A and Appendix B), to see if they could liaise the researcher with mothers who might be willing to participate. In addition to these resources, recruitment ads (a sincere and detailed invitation letter, both the original

Mandarin version and the translated English version are attached in Appendix C and Appendix D) was also posted on relevant media, such as the forum section of a major parenting website in Taiwan, three fan pages of parenting-related topics on Facebook, and on my acquaintances' Facebook wall to avoid the inclusion of individuals that I already knew. Although I strove to recruit as many participants as possible for structural equation modelling analyses, with the resources available to me, eventually I did not reach the target of 600 participants. Therefore, I turned to my contingency plan and performed parallel mediation analysis as a type of condition process modelling, as proposed by Hayes (2013). The literature and rules of thumbs recommend that an adequate sample size when conducting a mediation analysis can be estimated and determined according to calculation considering anticipated effect size, power level, number of predictors and α level (Fritz & Mackinnon, 2007; Hayes, 2013). Therefore, according to the calculation completed by software G*Power (Faul, Erdfelder, Buchner & Lang, 2009) considering all relevant parameters, a minimum sample size of approximately 232 participants can achieve power no less than .8 for the proposed model. That suggests the final valid sample of about 300 participants is an adequate sample size for conducting parallel mediation analysis.

4.1.3 Procedures.

In order to minimise the time and resources spent in distributing the surveys in Phase one, I used an online survey platform, Qualtrics, as my data collection tool. Participants who were willing to partake in this phase would receive a link to the survey. At the beginning of the survey, the consent form consisted of an introduction to the current stage of the study stating its purpose and the ethical rights of the participants (Both the original Mandarin version and the translated English version are attached in Appendix E and Appendix F). The participants only needed to continue answering the online survey should they agree and understand their rights. A demographic questionnaire, requesting basic information from the participants, formed the first part of the survey. Based on past research and from the interviews conducted in my MPhil project, questions about age (e.g. Mackenzie et al., 2006; Mackenzie, Scott, Mather & Sareen, 2008; Woodward & Pachana, 2009), education level (Crabb & Hunsley, 2006; Knipscheer & Kleber, 2005; Sheikh & Furnham, 2000), resident area/accessibility to

professional psychological help (Fung & Wong, 2007), extent of psychological distress and experience with professional psychological help (Vogel, Wade, Wester, Larson & Hackler, 2007) were included due to their possible association with attitudes towards seeking professional psychological help. Later on, the participants were asked to complete the main questionnaire consisting of five sections. Different measures were presented in the following sequence: attitudes towards professional psychological help, emotion expressivity, emotion regulation strategies, Chinese cultural values and, finally, attitudes towards mental illness. This arrangement purposefully mixes up the construct in order to avoid presenting them exactly as the proposed mechanisms. The measure of Chinese cultural values is pushed after the attitudes towards professional psychological help because past research has suggested that individuals with a Chinese cultural background tend to have more negative attitudes towards mental health services. Considering that priming individuals with Chinese cultural values might bias the participants' responses on their attitudes towards professional psychological help, this measure is placed after to establish whether unbiased attitudes can be predicted by an individual's cultural values. Similar decisions have been made with the measure of stigma towards mental illness. This is placed last as it may have an impact on participants' responses on other scales, since it explicitly requires an individual to express possible negative thoughts about a potential minority group. It is a concern that by placing this measure first, it may affect how the participants view themselves (cultural values) and psychological help. These, however, were just initial thoughts on how the sequence should be ordered. Piloting before the formal study was deemed necessary in order to determine the feasibility of the order of different measures, the presentation as well as the survey platform. Therefore, prior to embarking formally on Phase one, piloting the presentation of the questionnaires and the use of the Qualtric online survey platform was conducted with ten Taiwanese mothers who fit the representative sample profile. Their feedback was taken carefully into account and the necessary amends in wording and the presentation of choices were made to form the final formal online survey (Both the original Mandarin version and the English translated measures are attached in Appendix G and Appendix H). This has helped me in making sure that all the participants would find the questionnaires easy to understand and have no trouble responding to them on an online platform. Upon completing the online

survey, all participants would receive an electronic coupon (value of 100 New Taiwanese dollars) from a convenient store popular in Taiwan as a gesture of gratitude.

4.1.4 Analysis Plan.

In order to examine whether the proposed conceptual framework and the hypotheses are valid in explaining the relationship between Chinese cultural values and attitudes towards professional psychological help, structural equation modelling was planned to be adopted to analyse the data collected in Phase one. Structural equation modelling (SEM) is a flexible combination of various types of models that allows the modelling of relationships among observed variables (Schemacker & Lomax, 2004; Song & Lee, 2012). Its goal is to provide a quantitative test for a hypothesised theoretical model based on theory and empirical research. In this hypothesised model, researchers decide how the constructs are defined by the sets of variables, and the way they are related. SEM then helps to determine the extent to which the theoretical model is supported by sample data. That is to say, SEM examines various theoretical models using the scientific method of hypothesis testing to help develop a better understanding of the complex relationships between constructs, which fits the need for the examination intended in Phase one.

Given that most substantive theories in behavioural, educational and social sciences involve both observed and latent variables, SEM incorporates both (Lee, 2007). Latent variables, also called constructs or factors, are variables that cannot be directly observed or measured. Sometimes a latent variable is more appropriately defined by a combination of several observed variables according to theory or empirical findings (Song & Lee, 2012). These variables are inferred from a set of measurements, such as tests and surveys. The actual measurements we adopt are the observed, measured, manifest or indicator variables, which are sets of variables that we use to define or infer the latent variables (Schemacker & Lomax, 2004). Whether they are observed or latent variables, all variables can be defined as either independent or dependent. In the current proposed conceptual framework, cultural values, emotional expression, emotional regulation, stigma towards mental illness

and attitudes towards seeking professional psychological help are latent variables. The subscales in each inventory are then deemed as measured variables, which respectively define the latent variables they correspond to.

SEM is well recognised as a powerful multivariate statistical method serving the purpose of establishing an appropriate model to examine a series of simultaneous hypotheses about the impact of latent and observed variables on one another, and take measurement errors into consideration (Song & Lee, 2012). Hence, it is desirable to establish a comprehensive model that simultaneously takes all the interrelationships among all observed and latent variables into account. The initial appropriate formulation of the structural equation is necessary, just as the proposed conceptual framework and the hypotheses regarding the relationship between each construct. If the data do not support the hypothesised model, then it can be modified or a new one can be developed.

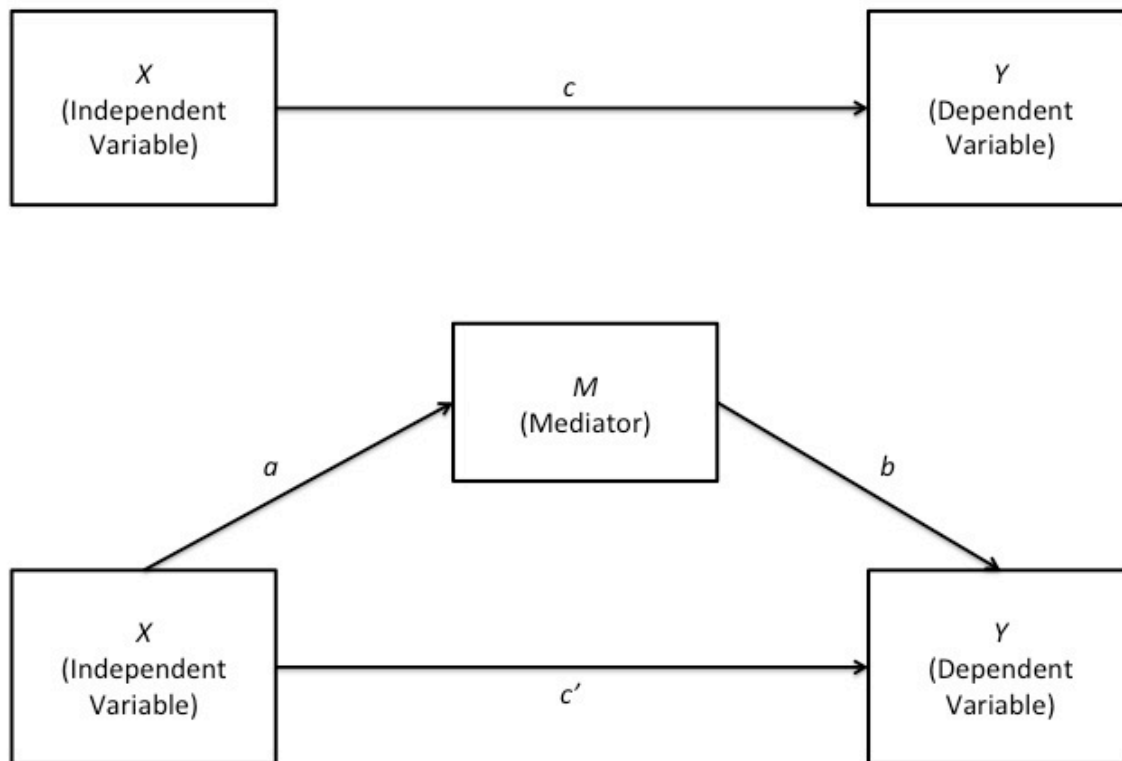
There are several reasons for initially wanting to adopt SEM in the current study. First, SEM can be easily understood and utilised if the researcher has an understanding of basic inference statistics, correlations and multiple regression analysis. Second, it provides an awareness of the need to use multiple variables in order to understand better the underlying mechanisms of the attitudes towards seeking professional psychological help in Taiwanese mothers. Basic statistical methods would be insufficient for they only consider the relationships between a limited number of variables, which is not suited for dealing with the sophisticated conceptual framework proposed here. In contrast, SEM has the potential to permit complex phenomena to be modelled statistically and tested. Hence, according to Schemacker and Lomax (2004), SEM is becoming the preferred method for confirming or disconfirming hypothesised models quantitatively. Thirdly, since measurement error has been recognised as a major issue in various disciplines, finding an appropriate method to take measurement errors into account is crucial. Measurement error and statistical analysis, however, have often been treated separately. With the conception of a measurement model, SEM can explicitly take measurement error into consideration in statistical analysis. In other words, SEM analysis measurement error terms are included alongside latent and observed variables in the SEM models. Fourthly, SEM allows for

more advanced hypothesis testing, for example multi-group differences and interaction effects. Fifth, although conducting SEM requires a relatively large sample size, advanced simulation techniques, like the Bayesian approach, provide flexibility as an alternative when facing difficulty in recruiting large samples (Dunson, 2000; Lee & Song, 2004). This is also, however, the primary reason for deciding not to use SEM eventually in the current study, as the final recruited sample size is small enough to risk the accuracy of parameter estimation, and lead to failure in establishing a meaningful statistical model or to false interpretations and inferences from model testing. In addition to being a poor fit for the current data, the execution of SEM requires basic computer language coding skills and fairly clear understanding of mathematical equations involved in the model to be tested. Unfortunately, the software programs that can perform SEM are not as user-friendly as condition process modelling, which will be introduced in the next section.

4.1.4.1 Mediation and PROCESS macro.

In this phase of the current study, I am interested in examining whether the variables in my proposed conceptual framework are related to one another. In order to achieve this with statistical testing support, as previously discussed, regression-based analyses were considered as suitable. Although not suited for concluding and inferring the causality between the independent and dependent variables in the present research design, regression-based analyses grant researchers who based themselves on theoretical frameworks a way to examine the potential patterns of the relationships between variables, and determine the outcome and which variables can predict this outcome. More specifically, in examining mediation effects in a multivariate regression model the aim is to find out how two variables are associated with one another, or the mechanisms underlying the relationship between the two variables (Baron & Kenny, 1986; Frazier, Tix & Barron, 2004), that is, how the effect of an independent variable operated on a dependent variable. This fits the aim of Phase one, where I attempt to unveil the underlying mechanisms between Chinese cultural values and attitudes towards seeking professional psychological help. Take one route of the proposed mechanisms in the conceptual framework (see Figure 2.2, p. 41) as an example. I would like to know whether Chinese cultural values affect attitudes towards seeking professional psychological help through their influence on the

stigmatisation of mental illness. In other words, is it possible that Chinese cultural values affect the extent of stigmatisation towards mental illness, which may subsequently influence the forming of more negative attitudes towards seeking professional psychological help? This kind of questions forms hypotheses that can be tested using mediation analysis. In this case, a mediator (M ; stigma towards



mental illness) is proposed to explain the relationship between an independent variable (X ; Chinese cultural value) and a dependent variable (Y ; attitudes towards seeking professional psychological help). This model is known as a simple mediation model, as there is only one mediator proposed between the independent and dependent variable (see Figure 4.1 for a graph of a simple mediation model).

Figure 4.1. Simple mediation model

In the example of the simple mediation model, the lower case italic letters a , b , c , c' represent the regression coefficients associated with the various paths. X is proposed to influence M (a), which in turn would affect Y (b). This is called the indirect effect (ab) of X on Y through M . This indirect

effect is calculated and obtained by multiplying a and b , that is, the two effects involved in this path (Hayes, 2013). Next, there is the direct effect (c'), which is the effect of X on Y while restraining M to be constant. By combining the indirect and direct effects, the total effect (c) is obtained. As shown in Figure 4.1, path c is the result of simply regressing Y on X (Hayes, 2013; Rucker, Preacher, Tormala & Petty, 2011). The result of the mediation analysis to see if there is indeed mediation taking place is determined by the strength of the indirect and direct effects (Baron & Kenny, 1986; Hayes, 2013; MacKinnon, Fairchild & Fritz, 2007). Mediation is considered to be successful if the indirect effect (ab) is significant. When this happens, the direct effect (c') may remain significant, decrease or even disappear. In the case of disappearance of direct effect, it is called a complete mediation. That is, the effect of X on Y is entirely due to M . Where the direct effects remain significant, then it is known as partial mediation. This means that M does account for part of the relationship between X and Y ; however, X can still predict Y when taking into account the effect of M (MacKinnon et al., 2007).

It is clear that my proposed mechanism is not a simple mediation. Rather, it is a more complex model called a parallel mediation model, which includes multiple mediators (Hayes, 2013). More than one variables ($M_1, M_2 \dots M_{k-1}, M_k$) are proposed to mediate the relationship between X and Y in a parallel mediation model (see Figure 4.2). There are multiple indirect effects in a parallel mediation model, as there are multiple numbers of mediators. Similar to the simple mediation described above, the indirect effects are calculated and obtained by multiplying a and b in each mediation path. Therefore, the indirect effects will be $a_1b_1, a_2b_2 \dots a_{k-1}b_{k-1}, a_kb_k$ for $M_1, M_2 \dots M_{k-1}$ and M_k respectively. The mediation of each mediator is considered to be successful if the indirect effect (a_ib_i) is significant.

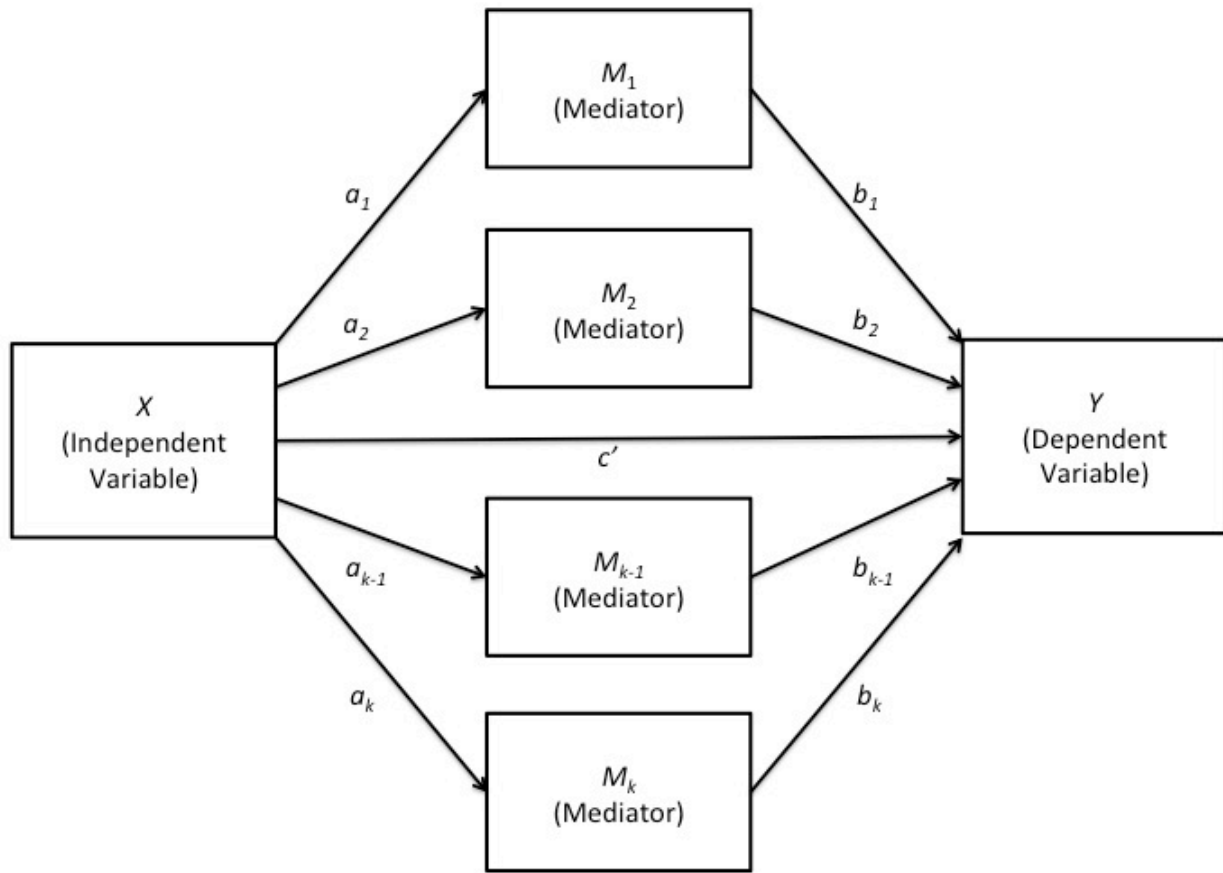


Figure 4.2. Parallel mediation model

The estimations of the coefficients of the direct and indirect effects examining the proposed model can all be calculated through structural equation modelling (SEM). Due to the previously discussed requirement of a large sample size and personal high-level coding skills required to perform such relatively complicated procedure, however, I decided to use the PROCESS macro procedure developed by Hayes (2013) instead as a contingency plan. PROCESS macro is a widely used, convenient and user-friendly add-on for SPSS that can be downloaded from www.processmacro.org for free. It is a suitable analysis tool for the purpose of Phase one in the current study, as it allows for the complex examination of the mechanisms through which the independent variables affect the dependent variables.

PROCESS macro was adopted as it provides a way to examine the questions that fit my conceptual framework. Also, it has much strength in the field of multivariate analysis, especially for complex regression-based analyses. It combines the functions of widely used and popular statistical

procedures and tools. Further, despite its ability to perform complex model testing, and keep on expanding its potential, it is designed as a simple-to-use statistical tool. It allows researchers to consider the influence of covariates in a parallel mediation model simultaneously. Also, it offers indexes of the effect size for indirect effects, which as mentioned above are indicators of the mediations. Finally, it provides ways of correcting and stabilising model testing if the assumption of homoscedasticity is violated.

In sum, PROCESS macro developed by Hayes (2013) is suitable for the examination of the proposed mechanisms in the current conceptual framework, as it can take multiple variables into account simultaneously and help identify their potential relationships. Preliminary descriptive analysis was conducted using SPSS to discern the initial patterns of data collected from Phase one, and any need to incorporate covariates, namely control variables in later analyses. Also, initial testings of the basic assumptions of using such model testing, including multivariate normality, linearity, homoscedasticity and no multicollinearity of the data collected were performed before running analyses to test the proposed mechanisms through the PROCESS procedure.

4.2 Results

4.2.1 Deletion process

At the end of the recruitment period for Phase one, a total of 378 people had accessed the online survey link. Upon closing the online survey platform, the sample was scrutinised. Thirty respondents were removed due to incomplete responses (failing to complete at least one instrument) and mismatch with the recruitment criteria. In order to ensure data quality, another 22 respondents were taken out of the final dataset because they failed to give correct answers to both error detecting items. This left the final valid sample consisting of 326 Taiwanese mothers with children younger than 18 years old.

4.2.2 Demographic characteristics

I conducted all data analyses for Phase one with SPSS version 23.0. The average age of participating mothers was 36.7 years ($SD=5.38$; ranging from 25 to 57 years old). The demographic background of participating mothers is presented in Table 4.2. All mothers are citizens of Taiwan (Republic of China). As shown in Table 4.2, most mothers had spent most of their lives in Taiwan; only 11.9% of the sample had lived overseas long-term. A relatively large proportion of recruited mothers are housewives or devoted to a career related to education. The majority of mothers in the current sample received education at undergraduate level or higher. When asked about experience with professional psychological help, only around one fifth of the recruited Taiwanese mothers suggested past experience of seeking professional psychological related services.

Table 4.2. *Demographic information of participants*

Demographic characteristics	Categories	n	Percentage
Occupation	Homemakers	71	21.8
	Education	84	25.8
	Service	41	12.6
	Medical related	34	10.4
	Labour	12	3.7
	Freelance	12	3.7
	Business	18	5.5
	Government employee	19	5.8
	Professional technician	16	4.9
	Others	19	5.8
Education	Junior high school or lower	1	0.3
	High school	36	11
	College or Bachelor's degree	205	62.9
	Master's degree	79	24.2
	Doctoral degree	5	1.5
Overseas experience	More than 3 years	19	5.8
	1–3 years	20	6.1
	6 months–1 year	9	2.8
	Less than 6 months	133	40.8
	Never	145	44.5
Residence area	Metropolitan	238	73
	Non-Metropolitan	88	27
Experience with Professional Psychological Help	Yes	66	20.2
	No	260	79.8

4.2.3 Preliminary analyses

The proposed mechanisms underlying how Chinese cultural values may impact on attitudes towards professional psychological help are presented once again in Figure 4.3. Preliminary analyses presented in this section include the following. First, the examination of measurement characteristics using descriptive analyses shows how the data look like in terms of descriptive statistics and distribution. For the descriptive characteristics of each measurement, see Table 4.4 (p.82). Second, evaluations of whether measurements are appropriate in the current sample through the examination of the internal consistency of each measure and the factor structure for the emotion regulation strategies were conducted. Lastly, in order to determine which demographics should be included in later regression analyses as control variables or covariates for the dependent variable, which is attitudes towards seeking professional psychological help, mean differences statistical analyses were conducted to inform later decisions. These preliminary analyses were opportunities to familiarise oneself with the data and provide indexes for data accuracy and quality for later formal analyses and inferences.

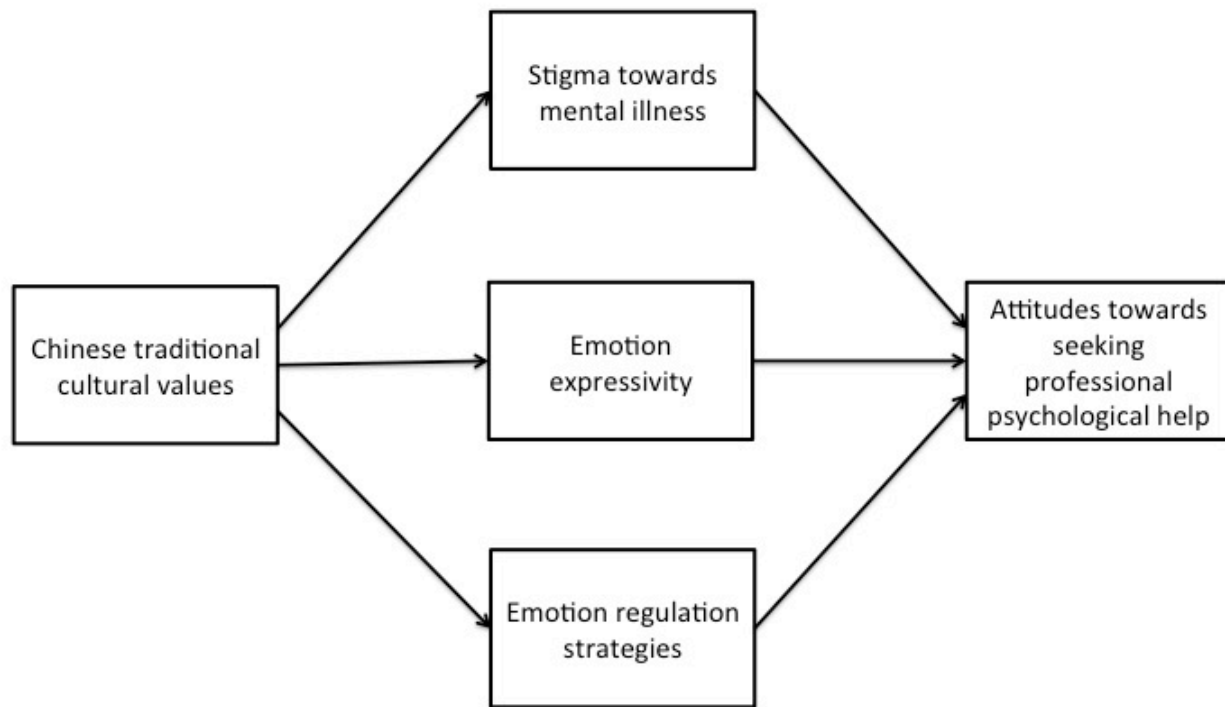


Figure 4.3. The mechanisms underlying the relationship between Chinese cultural values and attitudes towards seeking professional psychological help

4.2.3.1 Chinese traditional cultural values

The shortened version of the Chinese Individual Traditionality Scale adapted by Kao and Lu (2006) from the original Multidimensional Scale of Chinese Individual Traditionality (Yang et al., 1991) is used to assess the extent to which each Taiwanese mother upholds traditional Chinese cultural values. This 15-item questionnaire uses a 6-point Likert's scale, with 1 representing *strongly disagree* and 6 representing *strongly agree*. The total score was calculated to represent overall traditionality, that is, how much each mother adheres to traditional Chinese cultural values. A higher score means that an individual adheres more to traditional Chinese values. In the current sample of Taiwanese mothers, the mean of traditionality scale is 2.66, with a standard deviation of .65. As can be seen in Figure 4.4, the data distribution for traditionality among the current sample is very close to a normal

distribution, with a skewness index of $-.06$, and a kurtosis index of $-.16$. I use the total score of this inventory to represent the general extent of adherence to traditional cultural values. The internal consistency of the entire scale in the current sample is calculated by Cronbach's $\alpha = .85$.

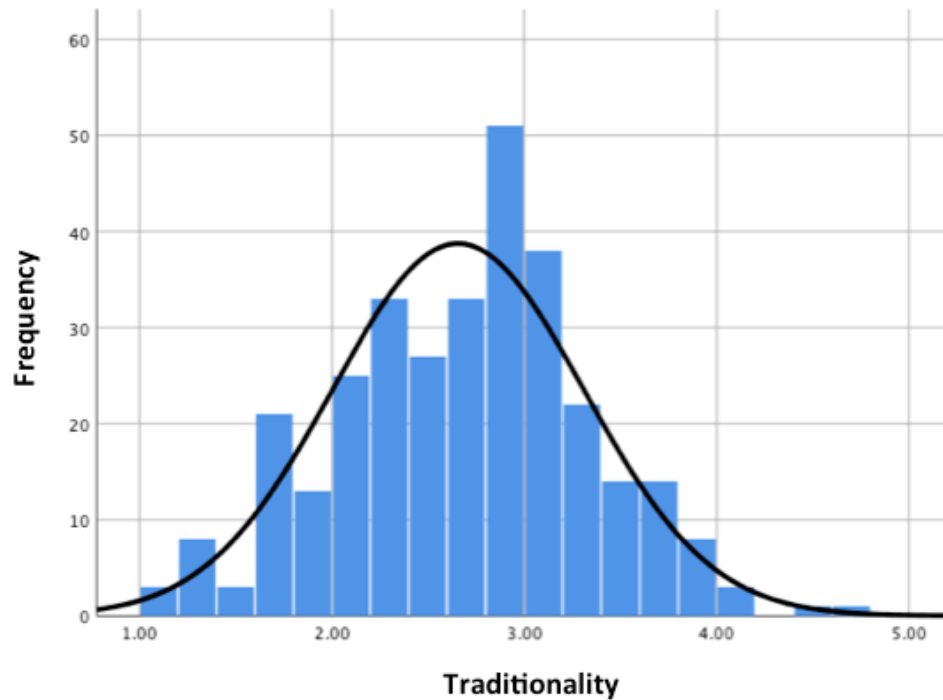


Figure 4.4. The frequency histogram of traditional Chinese cultural values

4.2.3.2 Attitudes towards Professional Psychological Help

For the dependent variable, I used the Mandarin version of Inventory of Attitudes Toward Seeking Mental Health Services (IASMHS) to represent Taiwanese mothers' attitudes towards professional psychological help. This inventory was developed by Mackenzie et al. in 2004, and was later translated and adapted into Mandarin by Wu (2010). In accordance to the cultural context in Taiwan, Wu adapted the use of the language in each item and added one extra item. The Mandarin version of IASMHS is a 25-item scale assessing mental health help-seeking attitudes, and the responses are measured on a 5-point Likert's scale (0 = *disagree* to 4 = *agree*) with higher total scores

indicating more positive attitudes towards professional mental health help. The mean of attitudes towards seeking professional psychological help in the current sample is 2.5, with a standard deviation of .46. The data distribution of attitudes towards professional psychological help in the current sample fairly resemble a normal distribution as presented in Figure 4.5. Its skewness is .19 and its kurtosis $-.36$. The internal consistency of the entire scale is good among Taiwanese mothers (Cronbach's $\alpha = .81$).

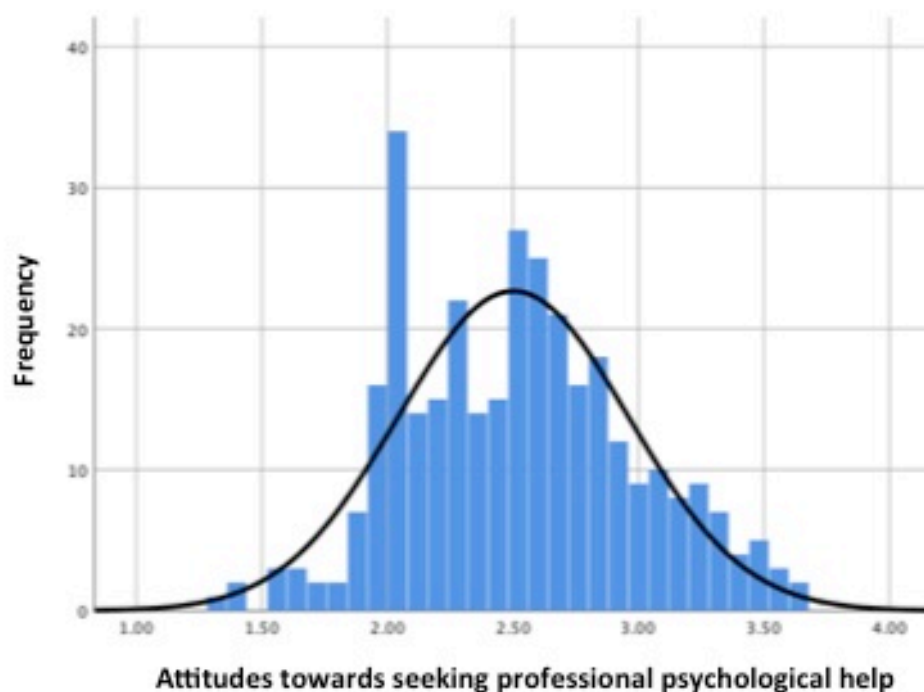


Figure 4.5. The frequency histogram of attitudes towards seeking professional psychological help

4.2.3.3 Stigma towards mental illness

The Attitudes Toward Mental Illness Scale (ATMIS; Zeng et al., 2009) was used to assess Taiwanese mothers' perception of mental illness. Minor corrections of the use of Mandarin in each item were made to adapt for slight differences in language between Taiwan and China. The scale includes 26 items. The total mean score was used to represent the general stigmatisation towards

mental illness of each Taiwanese mother. Participants responded on a 5-point Likert's scale ranging from *strongly disagree* (0) to *strongly agree* (4). Higher scores suggest more stigmatising attitudes towards mental illness. The mean of stigmatisation towards mental illness among this sample of Taiwanese mothers is 1.87, and its standard deviation is .58. As shown in Figure 4.6, the data distribution of stigmatisation towards mental illness is normally distributed in the current sample. The skewness is .19 and the kurtosis is .44. The internal consistency analysis as an index of reliability demonstrates ATMIS's Cronbach's α as .93.

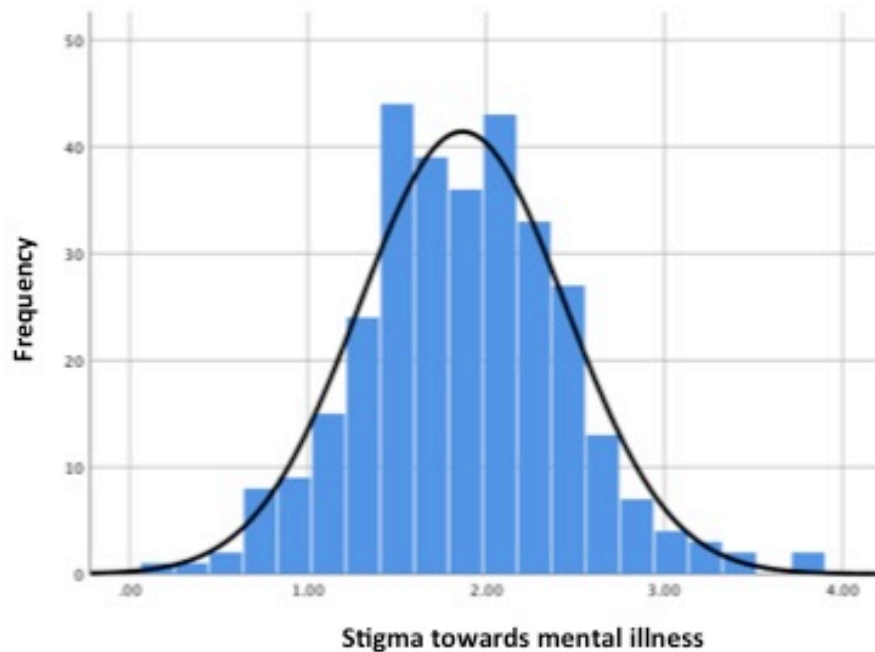


Figure 4.6. The frequency histogram of stigma against mental illness

4.2.3.4 Emotion Expressivity

Overall emotional expressivity was measured by the Berkeley Expressivity Questionnaire (BEQ), developed by Gross and John in 1997, and later translated and adapted in a Chinese context by Zhao et al. (2015). For this inventory, I made minor corrections of the use of Mandarin in some items to adapt to the Taiwanese context. It contains 16 items with a 7-point Likert's scale, ranging from 1,

strongly disagree to 7, *strongly agree*. The total mean score is used to observe general emotion expressivity, including the expression of both positive and negative emotions. The mean of emotion expressivity among the sample is 4.72 with a standard deviation of .62. Figure 4.7 shows that the data distribution of general emotion expressivity in the current sample fairly resembles a normal distribution with its skewness being .13 and kurtosis being $-.12$. The coefficient of internal consistency was acceptable (Cronbach's $\alpha = .79$) in the current sample of Taiwanese mothers.

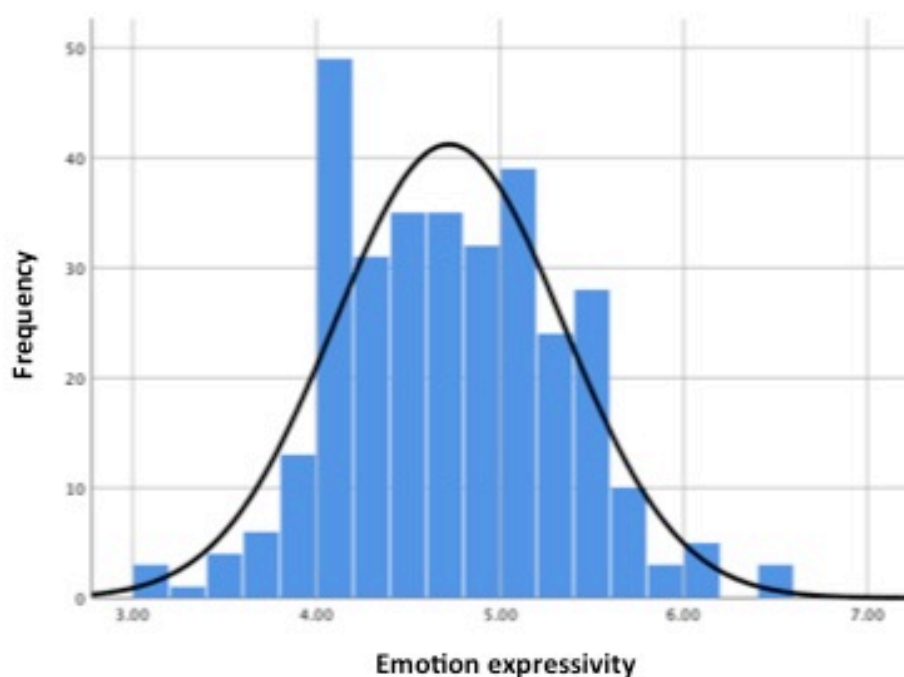


Figure 4.7. The frequency histogram of emotion expressivity

4.2.3.5 Emotion regulation strategy

Translated and adapted to the Taiwanese context by Li in 2004, the Emotion Regulation Questionnaire (ERQ), originally developed by Gross and John (2003), was used to assess Taiwanese mothers' individual differences in their use of emotion regulation strategies. According to Li's investigation in 2004, ERQ has a three-factor structure and was modified to fit the Taiwanese context by adding two items to the subscale, "Stay calm". Therefore, the Mandarin version used in my project

consists of three subscales and a total of 12 items (five items for Reappraisal, four items for Suppression and three items for Stay calm) to identify an individual's preference of emotion regulation strategy. It was designed as a 4-point Likert's scale. Respondents can choose from 1 – *strongly disagree* to 4 – *strongly agree*) according to the extent in which the item statement describes their own situation. A higher score for each subscale represents an individual's tendency of to use that type of strategy.

As different kinds of strategies will be analysed as mediators later on in the parallel mediation model, checking if the above factor structure still holds in the current sample is necessary. Therefore, exploratory factor analysis (EFA) was conducted to see if these 12 items are conceptually structured as three different kinds of strategies according to Li's (2004) previous investigation. Principal axis factoring as the extract method and Varimax rotation were used in determining the factor structure and interpreting the factors. The appropriate number of factors was based on criteria including reserving factors with Eigenvalue greater than one, the scree plot and original conceptualisation of the emotion regulation strategy. Both the Kaiser-Meyer-Olkin value ($KMO = .821$) and significance of Bartlett test of sphericity suggest the appropriateness of this factor analysis. According to the EFA conducted, two factors were with Eigenvalue greater than one, and would be able to explain more than 50 per cent of the total variance cumulatively, while the scree plot also suggested a two-factor solution (see Table 4.3). The factor loadings suggest that there are eight items grouped on Factor one, which is more conceptually similar to the Reappraisal subscale in both Gross and John's (2003) original version and Li's (2004) adapted version. The other four items grouped together on Factor 2, and are identical with the previous Suppression subscale in both versions. The factor Stay calm found in Li's (2004) study was not replicated in the current sample of Taiwanese mothers. According to the preliminary results, only Reappraisal and Suppression will be considered as emotion regulation strategies in later analyses.

Table 4.3. *Exploratory factor analysis of emotion regulation strategy*

Item	Factor Loading	
	1	2
Factor 1: Reappraisal		
Eigenvalue = 4.21 ; Variance explained = 35.08%		
1. When I want to feel more positive emotion (such as joy or amusement), I change what I'm thinking about.	.567	
3. When I want to feel less negative emotion (such as sadness or anger), I change what I'm thinking about.	.607	
5. When I'm faced with a stressful situation, I make myself think about it in a way that helps me stay calm.	.666	
7. When I want to feel more positive emotion, I change the way I'm thinking about the situation.	.704	
8. When I am in a stressful situation, I will find a way to calm myself down.	.649	
10. When I want to feel less negative emotion, I change the way I'm thinking about the situation.	.737	
11. I control my emotions by changing the way I think about the situation I'm in.	.646	
12. In the face of stress, I will come up with some ways for me to deal with it calmly.	.696	
Factor 2: Suppression		
Eigenvalue = 1.79 ; Variance explained = 14.95%		
2. I keep my emotions to myself.		.463
4. When I am feeling positive emotions, I am careful not to express them.		.442
6. I control my emotions by not expressing them.		.569
9. When I am feeling negative emotions, I make sure not to express them.		.621
Total cumulative variance explained = 50.02%		
<i>Note. Only loadings above .30 are presented.</i>		

The mean of Reappraisal in the current sample is 3.10 with a standard deviation of .34. As can be seen in Figure 4.8, the data distribution of Reappraisal does not adequately resemble a normal distribution, with its skewness being .52 and a relatively high kurtosis of 2.20. The mean of Suppression in the current sample is 2.44 with a standard deviation of .43. Its data distribution looks like a normal distribution, as shown in Figure 4.9. Skewness is .33, and the kurtosis is 1.10 for Suppression. Cronbach's α of the subscale Reappraisal is .86, while for Suppression it is .58. Further item-deleted internal consistency analysis was conducted, but no deletion of any specific item can improve the Cronbach's α of Suppression subscale significantly; therefore, the Suppression subscale was entered in later analyses as it is.

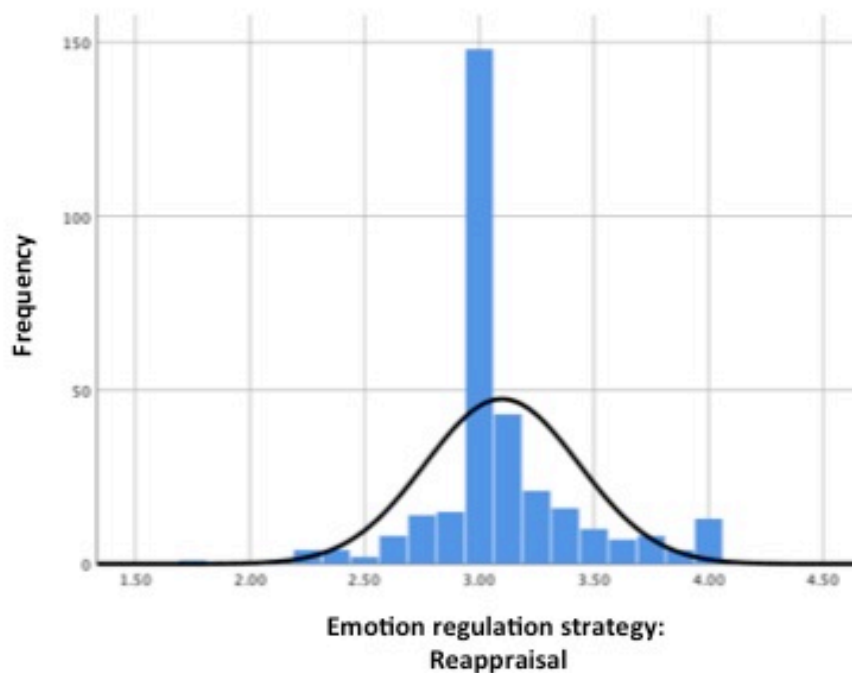


Figure 4.8. The frequency histogram of the Reappraisal emotion regulation strategy

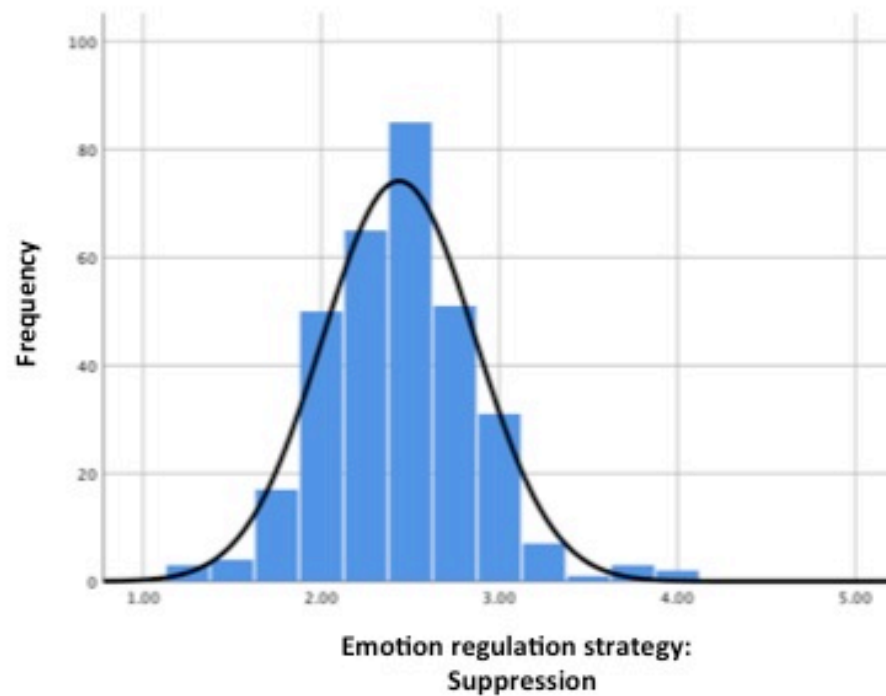


Figure 4.9. The frequency histogram of the Suppression emotion regulation strategy

4.2.3.6 Determining Potential covariates

Mean comparison analyses were conducted to see if any demographic data should be included as a covariate or control variable in the regression analyses. That is, ANOVA and T-test were conducted to see if Taiwanese mothers' attitudes towards seeking professional psychological help differ according to their age, formal education level, residential area, occupation, overseas experience and past experience of seeking professional psychological help. ANOVA and T-test results showed that only mothers with different overseas experience and past experience of seeking professional help differ significantly in their attitudes towards seeking professional psychological help. Other demographics did not have effects on the differences in attitudes towards seeking professional psychological help among Taiwanese mothers.

A one-way between subjects ANOVA was conducted to see if mothers with different overseas experience have different attitudes towards seeking professional psychological help. Results demonstrated that there was a significant difference on attitudes towards seeking professional psychological help at the $p < .01$ level for the five conditions of overseas experience [$F(4, 321) = 4.362$, $p = 0.002$]. However, as the Levene's test for homogeneity of variance is significant at the $p < .05$ level ($p = 0.026$), testing that does not assume homogeneity of variance was further conducted to check and support this difference found. Both Welch ($F(4, 40.25) = 5.745$, $p = .001$) and Brown-Forsythe ($F(4, 84.22) = 5.16$, $p = .001$) ANOVA suggested that there is indeed differences between groups of different overseas experience. Post hoc comparisons using the Games-Howell test indicated that the mean of attitudes towards seeking professional psychological help for mothers with more than three years of overseas experience ($M = 2.86$, $SD = 0.35$) was significantly higher than the more than six months and less than one year of overseas experience group ($M = 2.47$, $SD = 0.21$), the less than six months of overseas experience group ($M = 2.50$, $SD = 0.46$), and the no overseas experience group ($M = 2.43$, $SD = 0.44$). However, the attitudes towards seeking professional psychological help for mothers with more than three years of overseas experience did not significantly differ from that of mothers with more than one year and less than three years of overseas experience ($M = 2.66$, $SD = 0.55$). No other between-group differences were found in the Post hoc comparisons. Taken together, these results suggest that Taiwanese mothers' attitudes towards professional psychological help may differ according to their overseas experience. Specifically, the ANOVA results suggested that when Taiwanese mothers spend a longer period of time overseas, they have more positive attitudes towards seeking professional psychological help. However, it should be noted that the overseas experience must be very long-term (more than three years) in order to see a difference.

Conversely, an independent-samples t-test was conducted to compare attitudes towards seeking professional psychological help between mothers with and without past experience of seeking professional psychological help. There was a significant difference in the attitudes towards seeking professional psychological help for mothers with past experience with professional psychological help ($M = 2.69$, $SD = 0.48$) and mothers who do not have such experience ($M = 2.45$, $SD = 0.44$); $t(324) = 3.87$,

$p = 0.000$. This result suggested that the Taiwanese mothers' attitudes towards seeking professional psychological help differ according to their past experience with such resources. Specifically, the result indicated that when Taiwanese mothers have past experience with professional psychological help, their attitudes towards such help are more positive.

Therefore, according to the above examinations, overseas experience and past experience with professional psychological help will be entered as covariates that may potentially affect the dependent variable in later analyses.

Table 4.4. *Reliability and descriptive characteristics of each measure*

Variable	Attitudes	Chinese cultural values	Stigma	Expressivity	Re-appraisal	Suppression
Mean	2.50	2.66	1.87	4.72	3.10	2.44
S.D.	.46	.65	.58	.62	.34	.43
Cronbach's α	.81	.85	.93	.79	.86	.58

4.2.4 Underlying mechanisms examined – using parallel mediation analysis in PROCESS macro

In order to unveil the mechanisms underlying the relationship between Chinese traditional cultural values and attitudes towards professional psychological help, it is necessary to examine the following primary and secondary research questions by testing their corresponding hypotheses.

The primary research question of Phase one is:

How may Chinese cultural values shape the attitudes towards professional psychological help among Taiwanese mothers?

This question can be approached by the following secondary research questions (SRQ) and hypotheses (H):

SRQ1: Can Chinese cultural values predict Taiwanese mothers' attitudes towards professional psychological help?

H1: Taiwanese mothers' adherence to Chinese traditional cultural values can predict negatively their attitudes towards seeking professional psychological help.

SRQ2: Do Taiwanese mothers' Chinese cultural values affect their attitudes towards seeking professional psychological help through the stigmatisation of mental illness and psychological difficulties?

H2: Taiwanese mothers' adherence to Chinese traditional cultural values can predict positively their stigma towards mental illness and psychological difficulties.

H3: Taiwanese mothers' stigmatisation towards mental illness can predict negatively their attitudes towards seeking professional psychological help.

H4: Stigmatisation towards mental illness can mediate the relationship between Chinese cultural values and attitudes towards professional psychological help.

SRQ3: Do Taiwanese mothers' Chinese cultural values affect their attitudes towards seeking professional psychological help through their preference of expressing and regulating emotions?

H5: Taiwanese mothers' adherence to Chinese traditional cultural values can predict negatively their emotion expressivity.

H6: Taiwanese mothers' adherence to Chinese traditional cultural values can predict negatively their engaging of emotion regulation strategies (Cognitive Reappraisal).

H7: Taiwanese mothers' adherence to Chinese traditional cultural values can predict positively their inhibiting and disengaging of emotion regulation strategies (Suppression).

H8: Taiwanese mothers' emotion expressivity can predict positively their attitudes towards professional psychological help.

H9: Taiwanese mothers' use of engaging emotion regulation strategies (Cognitive Reappraisal) can predict positively their attitudes towards professional psychological help.

H10: Taiwanese mothers' use of inhibiting and disengaging of emotion regulation strategies (Suppression) can predict negatively their attitudes towards professional psychological help.

H11: Emotion expressivity can mediate the relationship between Chinese cultural values and attitudes towards professional psychological help.

H12: The use of emotion regulation strategies can mediate the relationship between Chinese cultural values and attitudes towards professional psychological help.

In order to examine the research questions and hypotheses, especially for testing the proposed parallel mediation model (see Figure 4.10, p.89), condition process modelling using SPSS 23 (IBM Corp., 2015) with the PROCESS macro procedure developed by Hayes (2013) is considered useful for the selected data analysis plan (please refer to section 4.1.4.1 Mediation and PROCESS macro, p.67 for more details). This variation of multiple regression analysis uses a path analytic approach and allows the researcher to examine the significance of the mediation effect while being able to consider simultaneously the potential influence of covariates. This statistical testing provides estimates of the indirect effects (mediation effects) using unstandardised coefficients. Combined with the bootstrapping technique to place 95% confidence intervals (CIs) around these estimates it examines whether mediation occurs. The newest version of PROCESS macro can be downloaded from the

following link: <http://processmacro.org/download.html>

Traditionality, as a representation of the extent of adherence to Chinese traditional values of Taiwanese mothers, was entered in the mediation model as an independent variable. Emotion expressivity, emotional regulation strategies and stigma towards mental illness were proposed mediators in the model. At the same time, Taiwanese mothers' past overseas experience and past experience of seeking professional psychological help were treated as control variables for attitudes towards professional psychological help in the model testing. Taken together, the effects of these proposed predictors on the dependent variable (attitudes towards professional psychological help) were examined.

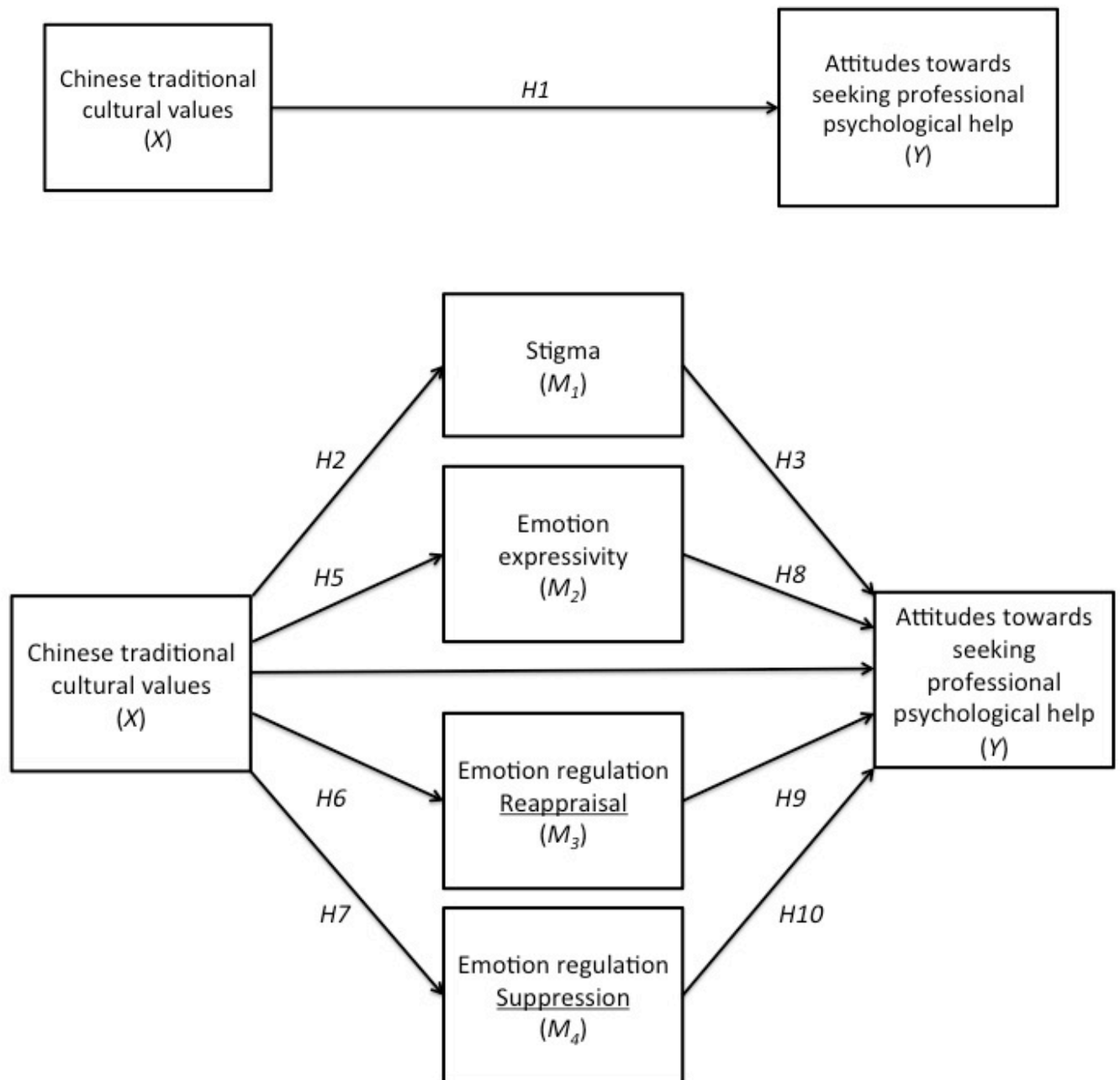


Figure 4.10. Proposed parallel mediation model of the attitudes towards seeking professional psychological help (with hypotheses presented on corresponding paths)

4.2.4.1 Data screening

Before delving into the mediation analysis, I first examine the variables to see if this parallel mediation analysis is appropriate for answering the research questions and testing the proposed hypotheses. The data assumptions of Hayes's (2013) conditional process modelling (with parallel mediation analysis being one kind of such model) follow the data assumptions of Ordinal Least Squares Regression (OLS). OLS is more commonly known as linear regression. Therefore, in conducting parallel mediation analysis, all outcome variables, in this case the mediator variables as well as the dependent variables, are assumed to be continuous (or at least treated as continuous if not strictly so). Conversely, independent variables can either be dichotomous or measured at least at the interval level. In the case of the current study, the variables in question (the independent variable: traditional Chinese cultural values, the dependent variable: attitudes towards seeking professional help, and the mediator variables: stigma against mental illness, emotion expressivity and emotion regulation strategies) are all measured on a Likert-type scale and are therefore assumed to be continuous, which should suit well with parallel mediation analysis. As for the two covariates, Hayes suggested (2013) that covariates are mathematically treated by default exactly like independent variables in the estimation. Taiwanese mothers' past experience with professional psychological help was originally a *yes* or *no* question; therefore, as a dichotomous variable it meets this requirement. The past overseas experiences of Taiwanese mothers were hence transformed into a binary variable of 0 and 1 to represent having long-term overseas experience or not according to the ANOVA results (please refer to section 4.2.3.6 Determining Potential covariates, p.84 for more details). Mothers who had overseas experience for over a year were considered as having long-term overseas experience and were coded as 1, while mothers who had no overseas experience, or had overseas experience for less than a year were considered as having no long-term overseas experience and were coded as 0. As mentioned above, for the parallel mediation analysis it is appropriate to use dichotomous covariates (Hayes, 2013).

Next, initial data screening for the accuracy of the dataset was partially conducted through previous descriptive analyses. Now, I use some indexes to see if there is any outlier in the dataset that will potentially be influential for later mediation analysis. Data points with large residuals and high

leverage may distort the outcome and accuracy of the later analyses of mediations. I choose three indexes for the existence of outliers in order to examine the possibility of existing outliers. The calculation of these indexes for each data point in my dataset is effected by running a multiple linear regression model with all predictive variables (covariates, independent variable and mediators) predicting the dependent variable (same as the final model in later parallel mediation analysis), using SPSS with the option checked for providing outlier indexes. First is the Mahalanobis distance index. As the degree of freedom is the number of predictors in this index, the cut-off point for the current dataset is 24.32 according to a chi-square table. Those instances with a Mahalanobis distance index higher than 24.32 are marked as potential influential cases for later exclusion. Next is Cook's distance. The rule of thumb that values more than $4/\text{number of observations}$ (.013) is adopted to determine which cases might be influential outliers in the current sample. Identical with the Mahalanobis distance index, instances with a Cook's distance index higher than .013 are marked as potential influential cases for later exclusion. Finally, for the leverage index, a value higher than $(2 * \text{number of predictors} + 2) / \text{number of cases}$ (.05) is considered as high on leverage and marked for later exclusion. In order to determine which cases will be excluded in the later parallel mediation analysis, I adopted the two strike-out principle, which means that any case with more than two indexes higher than the above presented cut-off points is excluded to avoid inaccuracy and ensure the quality of later analyses. In the end, 21 cases were taken out as potential outliers and influential points for the formal analyses.

4.2.4.2 Assumption testing

The final step before going into the formal parallel mediation analysis to test the proposed mechanisms and hypotheses attached to them, is that it is necessary to consider statistical assumptions for conducting such analyses. Therefore, the assumption testing results excluding the outliers are presented below. As mentioned in the previous section, Hayes (2013) suggested that the assumptions of running conditional process modelling meet the standard assumptions of OLS regression. Since in the current study, there are conceptually multiple factors contributing to the attitudes towards seeking professional psychological help among Taiwanese mothers, the assumptions that I need to test for are the assumptions of conducting multiple linear regression analysis. These assumptions include linearity,

no multicollinearity, multivariate normality and homoscedasticity. Examinations of whether the current data meet these assumptions are presented below.

Linearity

This data assumption requires the relationship between the predictive and dependent variables to be linear. The linearity assumption is tested with the generation of scatterplots between the independent variable: traditional Chinese cultural values; the mediators: stigmatisation towards mental illness, emotion expressivity and two kinds of emotion regulation strategies; and the dependent variable: attitudes towards seeking professional psychological help. Looking at the scatterplots in Figures 4.11 – 4.15, produced by SPSS, one can see that the relationships between the predictors and the dependent variable could all be moderately modelled by a straight line. These scatterplots suggest that the relationships between these variables are fairly linear compared to other non-linear relationship examples. Therefore, the assumption of linearity is met for the current sample.

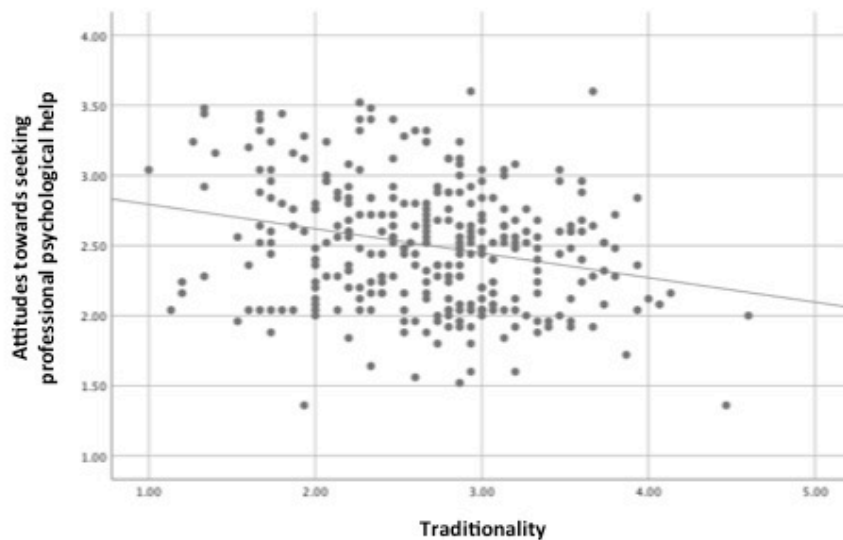


Figure 4.11. The scatterplot of traditionality and attitudes towards seeking professional psychological help

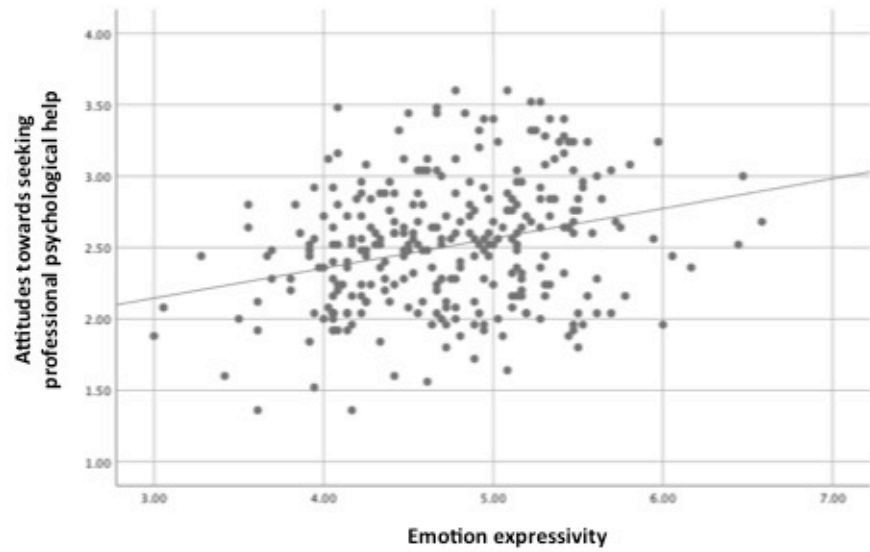


Figure 4.12. The scatterplot of emotion expressivity and attitudes towards seeking professional psychological help

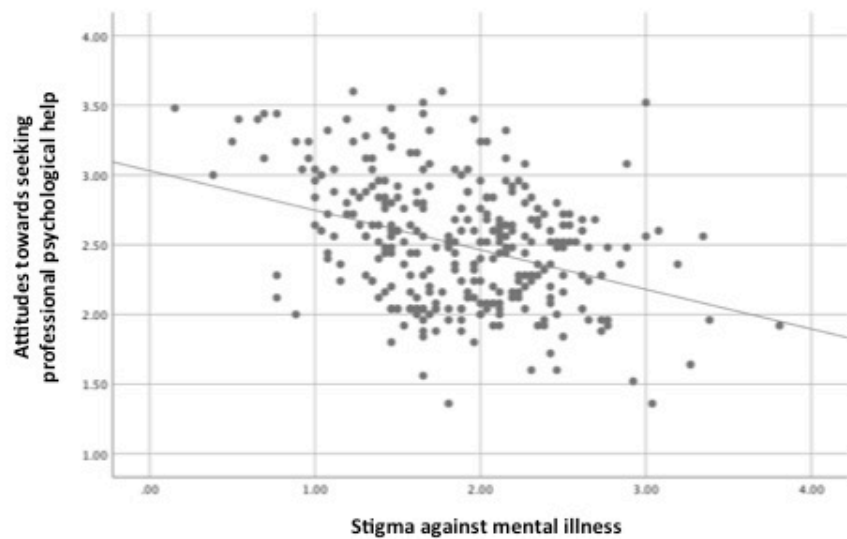


Figure 4.13. The scatterplot of stigma against mental illness and attitudes towards seeking professional psychological help

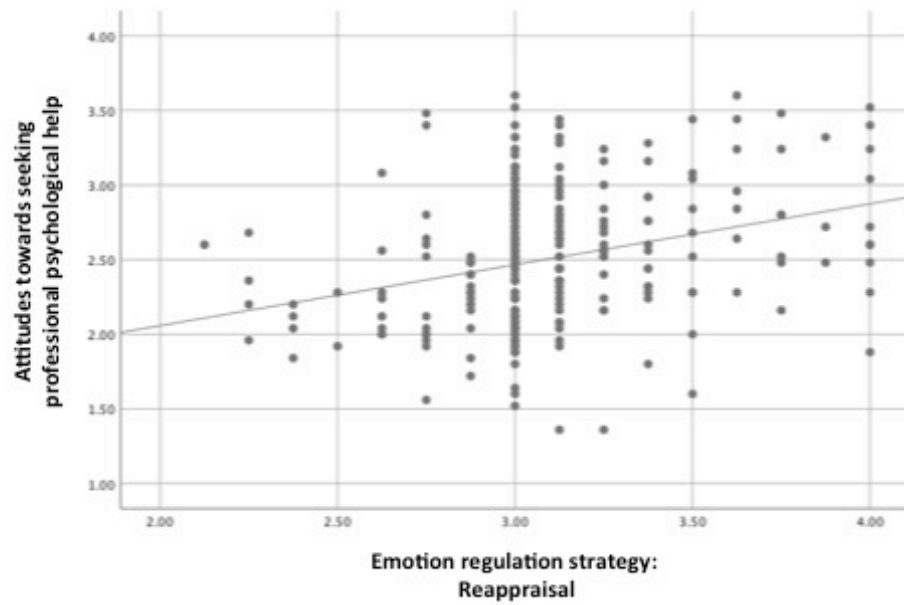


Figure 4.14. The scatterplot of reappraisal emotion regulation strategy and attitudes towards seeking professional psychological help

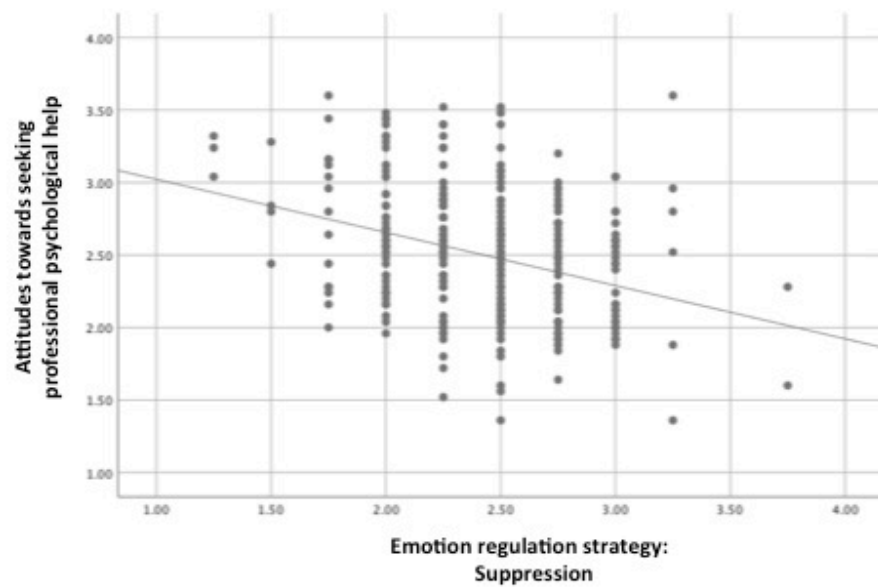


Figure 4.15. The scatterplot of suppression emotion regulation strategy and attitudes towards seeking professional psychological help

No Multicollinearity

Multicollinearity occurs when the associations between the predictors are too strong. This means that these variables are too highly correlated with one another and could risk the accuracy of estimation in regression analyses. One does not want correlations between the predictors to be perfect or approximating perfection. Multicollinearity is checked in multiple ways in the current sample: first, through the screening of the correlation matrix. When computing a matrix of Pearson's bivariate correlations among all predictors, the magnitude of the correlation coefficients should be less than .80. As can be seen in Table 4.5, there are some statistically significant correlations but none near value 1, indicating no signs of multicollinearity. Hence, according to the correlation matrix, the current data meet this data assumption.

Table 4.5. *Pearson correlations between variables*

	Variable	1	2	3	4	5	6	7
1	Attitude	1						
2	Psychological distress	-.008	1					
3	Chinese cultural values	-.251**	.052	1				
4	Stigma	-.355**	.109	.311**	1			
5	Emotion Expressivity	.285**	.210**	-.051	.024	1		
6	Reappraisal	.287**	-.163**	-.138*	-.183**	.070	1	
7	Suppression	-.327**	.102	.277**	.097	-.331**	.001	1

* $p < .05$, ** $p < .01$

Another indication of whether there is multicollinearity in the data is the collinearity diagnostic: VIF. In order to run this diagnostic, I re-run a multiple linear regression model with all predictive variables (covariates, independent variable and mediators) predicting the dependent variable (same as the final model in later parallel mediation analysis) through SPSS without the outliers this time. This procedure in SPSS can generate automatically the VIF index that detects potential collinearity in the data. The VIFs of all predictors generated from my data in this multiple regression model range from 1.04 to 1.23, and tolerance ranges from .81 to .97. Given that these VIFs are all

lower than 10 and the average VIF is not substantially greater than 1, while the tolerances are all greater than 0.2, there are no signs of multicollinearity, which is of concern given the above results (Myers, 1990; Menard, 1995).

Multivariate normality

The next data assumption to be met is multivariate normality. Multivariate normality means that the residuals, in other words the estimation errors, are normally distributed. In order to see normality in residuals, I expect the error terms, also known as residuals, to be centred around zero and normally distributed in the current sample. In order to examine this assumption, I created a histogram of the predictive value residuals and a P-P plot to see the status of distribution of the residuals (see Figures 4.16 and Figure 4.17) in the previously mentioned multiple regression model. In the histogram, as can be seen in Figure 4.16, the residuals are centred over zero, and mostly distributed between -2 and 2 . This suggests that the distribution of error terms approximates normality. For the P-P plot, the dots of cumulative probability of residuals lies very closely to the normal distribution line, which indicates a similar result in the histogram; therefore, the multivariate normality assumption is not violated in the current sample.

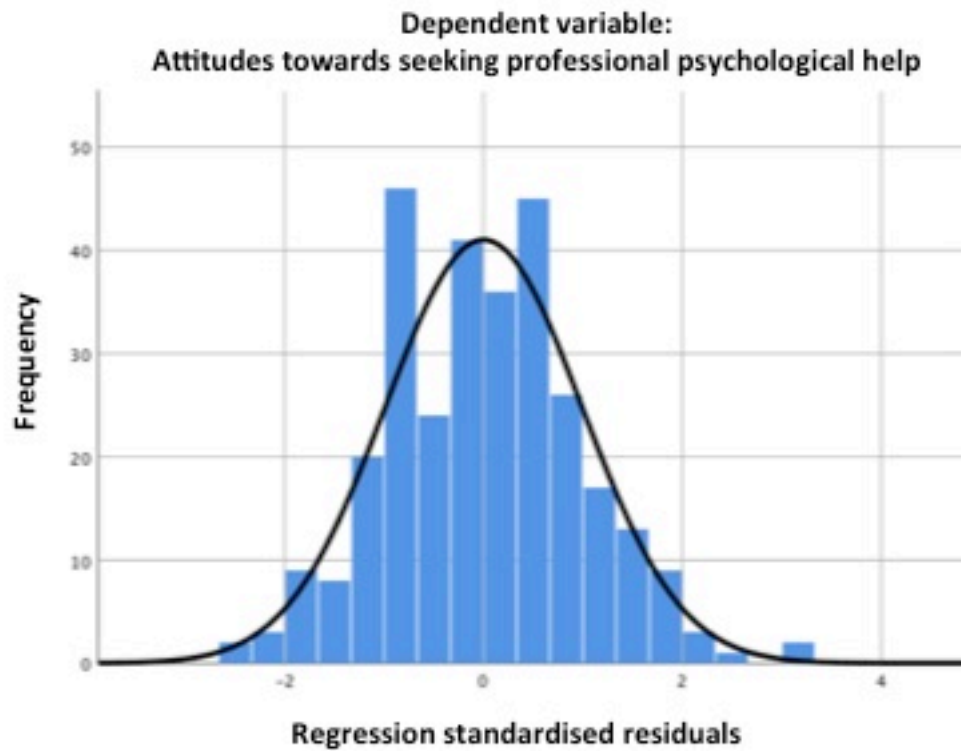


Figure 4.16. The frequency histogram of standardised residuals in the regression model predicting attitudes towards seeking professional psychological help using all predictors

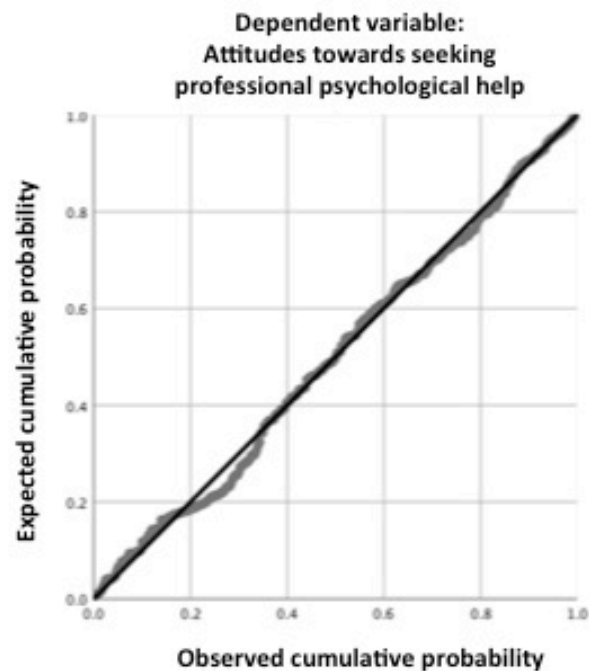


Figure 4.17. The normal P-P plot of regression standardised residuals in the regression model predicting attitudes towards seeking professional psychological help using all predictors

Homoscedasticity

Homoscedasticity implies that the variance of residuals should be similar across different values of the independent variables. A scatterplot of residuals versus predicted values is used to check for homoscedasticity. As can be seen in Figure 4.18, there is no clear pattern in the distribution. The data points are scattered and resemble a blob. As there is no sign of a particular shape in the distribution, for example a triangle or cone-shaped pattern to suggest heteroscedasticity in the data, the current data meet the assumption of homoscedasticity.

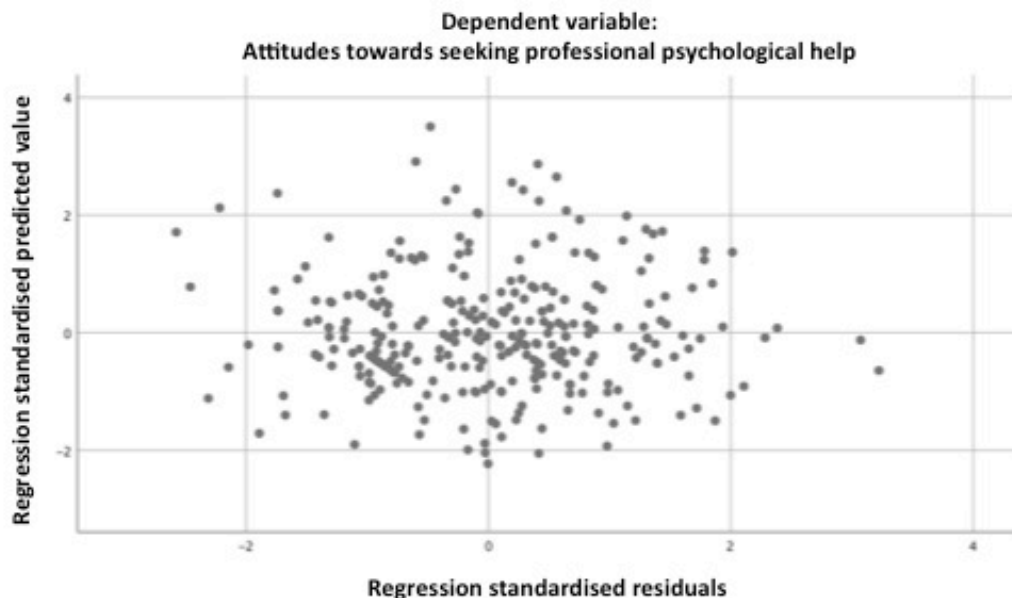


Figure 4.18. The scatterplot of the standardised residuals and standardised predicted value of a regression model predicting attitudes towards seeking professional psychological help using all predictors

In conclusion, there are no major assumption violations to be noted for the parallel mediation analysis that will follow.

4.2.4.3 Chinese traditional cultural values as a negative predictor of attitudes towards professional psychological help, and the possible existence of mediation

The results of parallel mediation analysis using Hayes's (2013) PROCESS macro procedure in SPSS are organised in Table 4.6 (p.102). As shown, after controlling for covariates including Taiwanese mothers' overseas experience and previous experience with professional psychological help, Chinese traditional cultural values can significantly predict attitudes towards professional psychological help negatively in the regression model ($\beta = -.16, p < .001$, Total effect: c). This means that the more deeply entrenched Chinese traditional cultural values Taiwanese mothers hold, the more negative attitudes they will have towards seeking professional psychological help. Therefore, *H1* is supported.

When all proposed mediators, however, are entered in the model along with the Chinese traditional cultural values and control variables, the direct effect of the independent variable (Chinese traditional cultural values) on the dependent variable (attitudes towards professional psychological help) becomes non-significant ($\beta = -.04$, n.s., direct effect: c'). This suggests that it is possible that the proposed mediators mediate the found effect of the independent variable on the dependent variable. Nevertheless, the rest of the hypotheses need to be supported in order to know whether the mediation did occur and exactly which mediators contribute to the mediation mechanism.

4.2.4.4 Mediating role of stigma towards mental illness

As shown in Table 4.6, after consideration of all control variables, Chinese traditional cultural values were demonstrated to be a significant positive predictor of stigma towards mental illness ($\beta = .26, p < .0001, a_1$). This provides evidence to support *H2*. Subsequently, stigma towards mental illness can significantly predict attitudes towards professional psychological help negatively when the independent variable, all covariates, and other proposed mediators have been taken into account ($\beta = -.19, p < .0001, b_1$). Thus, *H3* is supported in this case. In order to ascertain whether mediation occurred through any specific mediator, the PROCESS macro procedure performed

bootstrapping to generate estimates of the mean true indirect effect in the population. Indirect effect in the mediation model means the effect of the Independent Variable \rightarrow Mediator \rightarrow Dependent Variable, i.e. the mediation effect. The mediation effect exists if the range between the upper and lower limits of the 95% confidence intervals (CIs) generated by bias–corrected bootstrapping of the estimates does not include zero. This means that the true indirect effect is supported with 95% confidence to range from the upper and lower limits. Since zero is not included in the range, then one can say with 95% confidence that the indirect effect (mediation effect) is not zero and that the effect is significant. In the case of stigma towards mental illness as a proposed mediator: its indirect effect = $-.05$ (a_1b_1), BootCI $[-.08, -.02]$, zero is not included in the CI; therefore, indirect effect is supported. Stigma towards mental illness has a mediation effect between Chinese traditional cultural values and attitudes towards professional psychological help. Hence, $H4$ is supported.

4.2.4.5 Mediating role of emotion expressivity and emotion regulation strategies

Moving on to the remaining hypotheses, Table 4.6 shows that Chinese traditional cultural values are not a significant predictor for emotion expressivity ($\beta = -.04$, *n.s.*, a_2). $H5$ is, therefore, not supported in the current data. Chinese traditional cultural values, however, are able to predict significantly all emotion regulation strategies (Reappraisal: $\beta = -.07$, $p < .05$, a_3 ; Suppression: $\beta = .17$, $p < .001$, a_4), providing support for $H6$ and $H7$. Next, Emotion expressivity ($\beta = .14$, $p < .01$, b_2), Reappraisal ($\beta = .33$, $p < .001$, b_3) and Suppression ($\beta = -.23$, $p < .001$, b_4) can all significantly predict attitudes towards professional psychological help. Hence $H8$, $H9$ and $H10$ are supported.

Testing of the remaining proposed mediators shows that mediation between Chinese traditional cultural values occurred through emotion regulation strategies (Reappraisal: indirect effect = $-.02$, BootCI $[-.05, -.005]$; Suppression: indirect effect = $-.04$, BootCI $[-.07, -.01]$), but not through Emotion expressivity (indirect effect = $-.01$, BootCI $[-.02, .01]$). $H11$ lacks support from statistical evidence, while $H12$ is supported in this sample.

Shortly concluding the above, parallel mediation analysis has shown the following: the statistics indicated that traditional Chinese cultural values are indirectly related to attitudes towards

seeking professional psychological help among Taiwanese mothers through its relationships with the stigmatisation of mental illness and different kinds of emotion regulation strategies. Therefore, the proposed underlying mechanisms, except for the path through emotion expressivity, in the conceptual framework can explain the relationship between Chinese cultural values and attitudes towards seeking professional psychological help among Taiwanese mothers (see Figure 4.19, p.103).

Table 4.6. R^2 , unstandardised estimates and standard error of the multiple regression models (parallel mediation model)

Variable	Mediator								Dependent variable			
	Stigma		Emotion expressivity		Reappraisal		Suppression		Attitude			
	β	SE	β	SE	β	SE	β	SE	β	SE	β	SE
Control variables												
Overseas experience	-.14	.09	-.00	.10	-.03	.05	-.10	.06	.18*	.07	.14*	.06
Experience with PPH [★]	-.17*	.08	.12	.09	-.06	.05	-.05	.06	.21**	.06	.17**	.05
Independent variable												
Chinese cultural values	.26***	.05	-.04	.05	-.07*	.03	.17***	.03	-.16***	.04	-.04	.04
Mediator												
Stigma											-.19**	.04
Emotion expressivity											.14**	.04
Reappraisal											.33***	.07
Suppression											-.23**	.06
R^2	.121***		.009		.026 ⁺		.09***		.121***		.339***	

[★]professional psychological help

* $p \leq .05$

** $p \leq .01$

*** $p \leq .001$

⁺ $p=.051$

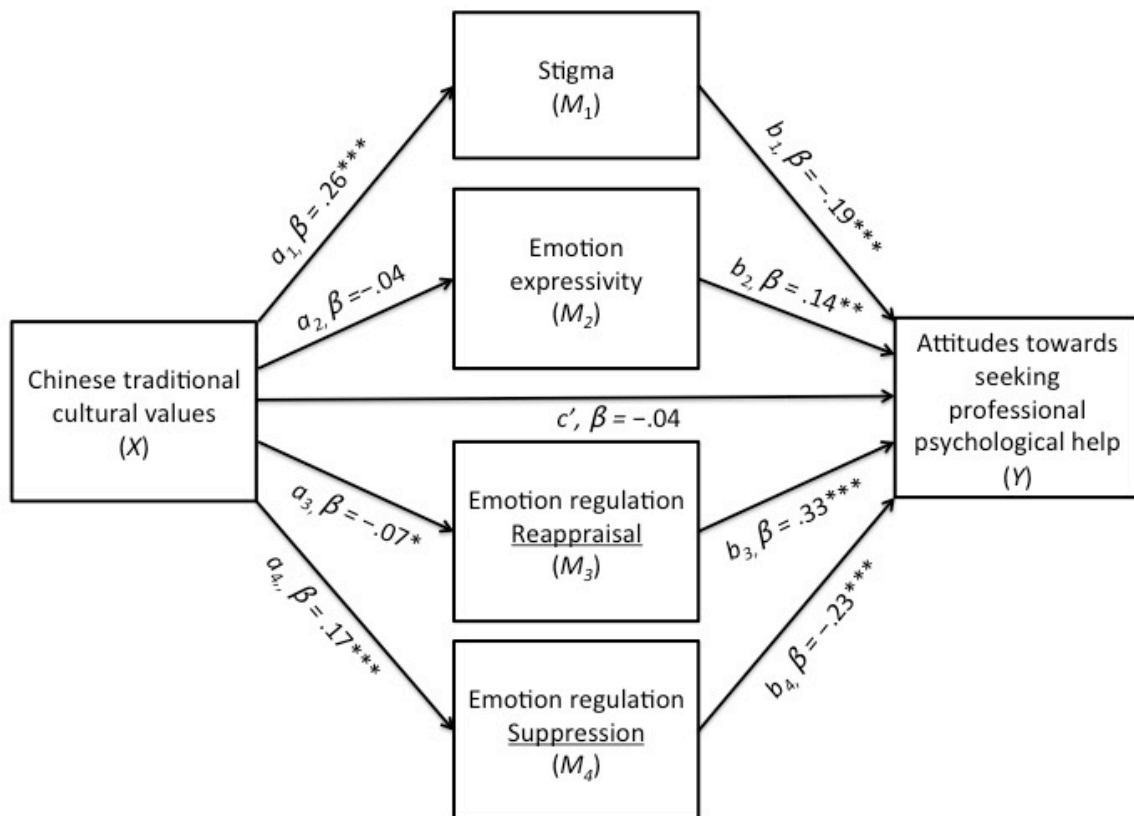


Figure 4.19. Unstandardized coefficients for the parallel mediation model of attitudes towards seeking professional psychological help among Taiwanese mothers

Chapter 5. Phase two:

**Exploring Taiwanese Mothers' Views of Mental Illness,
Emotion Expressivity, Habits of Emotion Regulation and
Professional Psychological Help – uncovering the rationales**

5.1 Brief overview of the aim and research questions of Phase Two

The aim of the second qualitative phase is to triangulate and explain the mechanisms found in Phase one further. In attempting to understand Taiwanese mothers' subjective experience of each construct and their relationship directly through conversations with them, I expect to gain a deeper understanding of the underlying mechanisms involved. While in Phase one, the quantitative statistical results provided evidence of the relationships between variables with generalisability to the current generation of Taiwanese mothers, the in-depth qualitative interviews in Phase two can elucidate the nuances behind why these variables may be related to one another. In addition to validating the general pattern and expanding the results found in the first quantitative phase, the in-depth exploration of Taiwanese mothers' subjective experience plays a very important role in contributing information that cannot be provided solely with quantitative results. The interviews in Phase two revealed the participants' perspectives that are mostly hidden or lost behind the general pattern and the administration of limiting quantitative measures.

The primary research question of Phase two is:

Why may attitudes towards professional psychological help be related to the proposed constructs?

This will be approached with the following secondary research questions:

- A) What are Taiwanese mothers' views on the concepts of the conceptual framework (see Figure 2.2, p.41 or Figure 4.3, p.75) according to their own experience and background?
- B) How do they subjectively perceive and interpret the relationships between these constructs?

5.2 Method

5.2.1 Research interviews

In this phase, research interviews were conducted to understand better the Taiwanese mothers' subjective experience of how they view emotional experience, mental illness and professional psychological help. Research interviews often take contextual, interpretive perspectives to approach research questions (King & Horrocks, 2010; Rubin & Rubin, 2012; Warren, 2001). These involve careful questioning and listening techniques with the purpose of constructing knowledge. As in Kvale and Brinkman's (2009) definition, qualitative research interviews are processes in which researchers attempt to understand the world from the participants' point of view, to unfold the meaning of their experiences, and to uncover their world prior to scientific explanations. This corresponds with the purpose of this stage of the current research project, whose key interest is to unveil Taiwanese mothers' subjective perception of emotion experience, mental difficulty and professional psychological help through their cultural lens, which has been shown as very unique and, therefore, contextual. The purpose of using qualitative interviewing in this phase is to derive interpretations of the meaning of the respondents' experiences in an interactional framework, not objective facts or laws, but from conversations with participants to gain an open understanding (Warren, 2001; Johnson, 2001). This means that in this phase I try to explore Taiwanese mothers' perceptions through my own conceptual framework running in the background to guide the design and execution of the interview questions, while constantly reminding myself to be open and without any preconceptions or hypotheses in interviews and analyses. I prepare myself to embrace any surprises and to expect and look forwards to new insights.

5.2.2 Personal construct techniques

Through my past experience in interacting with and interviewing Taiwanese mothers (Chang, 2014), sometimes the process of having a conversation under the structure of academic interview

questions requires more effort than an ordinary life conversation. Especially for those who partake in research studies for the first time, it is even more difficult to get accustomed to the questions of a scholarly interview. Even when the researcher has put a lot of effort in transforming the questions into a non-academic style, many interview questions still seem very abrupt to the participants. They may never have encountered some of the questions in their lives before. Therefore, appropriate small tasks developed from Personal Construct Theory are designed as a warm-up for the participants to think about related issues in the interview in order to help them answer the interview questions. In addition to this, instead of explicit questioning, Personal Construct Theory techniques, such as the repertory grid, are theoretical-based techniques that grant me a chance to activate implicitly the mindset of my participants, preparing them to explore their subjective world with me efficiently. Moreover, some of the techniques, such as self-characterisations, inspire creativity in forming the interview questions. Finally, the existence of different small tasks based on Personal Construct Theory infuse the whole interview with something fun (compared to continuing verbal responses to the interview questions), which can prevent both the interviewer and the interviewee from experiencing fatigue. In the following section, a brief introduction of the Personal Construct Theory and some techniques (those used in the current study) will be presented to show why these techniques can be useful as efficient and systematic ways of warming up and preparing the participants for the interview questions.

Personal construct theory. In 1955, George Kelly published the theory of Personal Constructs and proposed that people are adventurers who are capable of experimenting with how they make sense of their lives (Walker & Winter, 2007). Kelly's central assumption of his theoretical position is the concept of construing. He proposed that human beings, as "adventurers", can actively construct the meaning of their own lives. By continuously devising, testing and revising personal theories, individuals can then make sense of the world around them and anticipate future experiences (Fransella, Bell & Bannister, 2004; Caputi, Viney, Walker & Crittenden, 2011). These personal theories are called "construct systems" and are composed of hierarchically linked sets of various dichotomous personal constructs that help differentiate, integrate and predict life events (Hardison & Neimeyer, 2011). A construct is defined as the particular way an individual views, gives meaning to or construes

the individuals and events in their life (Kelly, 1955). All constructs are “bipolar,” implying contrast in every construct, as stated in Kelly’s Dichotomy Corollary (Kelly, 1955; Fransella et al., 2004). Attitudes, which are a main interest of the current study, can also be seen as an individual’s personal construct systems. Under the guidance of our construct systems, we live, anticipate events, determine our behaviour and ask our questions. Personal constructs may be idiosyncratic or widely shared, and may vary in terms of how central or important they are in construing a particular individual’s life (Winter, 1992). Personal constructs can represent how everyone uniquely construes or interprets their own world (Hardison & Neimeyer, 2011). Understanding these constructs is essential because this hierarchically formed and organized construct system can form the basis for hypotheses that guide an individual’s unique choices and actions (Winter, 1992). Indeed, as already mentioned in the literature review regarding the uniqueness of the Chinese culture’s view on emotions and mental health, people in the same cultural group might have a tendency towards sharing some unique values that are distinct from other cultures, which is what the current study is mainly trying to figure out. Furthermore, individuals in Taiwanese society may gain experience through continuously testing their view on mental health issues including the intention or actual behaviour of seeking professional psychological help in their surrounding context where Chinese cultural values prevail. Therefore, through this process they will obtain their own construct of these issues, and the techniques developed to reveal these constructs will facilitate our understanding of their subjective world.

Kelly (1955) suggested that the best way to find explanations of a person’s organisation of experience or behaviour is by inquiring the person who does the construing, because he or she is an expert on this unique process. This leads to Kelly’s additional contribution, namely the development of many methods for assessing personal construing. These methods are usually conversational but structured in nature (Walker & Winter, 2007), making them suitable for being incorporated into a research interview. In such interviews where co-construction of knowledge is taking place, participants become active co-investigators, along with the administrator of these techniques, in exploring how participants experience, understand and interpret their reality. The best-known and most widely used of Kelly’s methods is the repertory grid. The repertory grid is used to explore the relationships between

a series of elements and a set of constructs or dimensions that are used to make sense of elements. Grid-based techniques are not limited to exploring construct-element relationships. For instance, dependency grids are used to sort what resources a person might use in a variety of situations (Walker & Winter, 2007), and are very often adopted in a psychotherapeutic setting. Personal Construct Psychology also offers non-grid-based methods, such as Kelly's (1955) self-characterisation technique, which can be easily incorporated into an ordinary research interview.

The repertory grid. As can be seen in the above discussion, in view of the Personal Construct Theory, there is an underlying implicit personal theory that navigates each single act of judgement that a person makes, no matter whether consciously or unconsciously. The repertory grid technique is, in its multiple forms, a structured interview procedure that allows the researcher or clinicians to explore the structure and content of such implicit theories via a glimpse through the “goggles” of the client's construct system (Fransella et al., 2004; Kelly, 1955). The goal of the repertory grid method is to facilitate an investigation of a person's construing process of various aspects of his or her world, and of the structural properties of the construct system.

The repertory grid consists of eliciting from the participants a list of elements, and rating those elements on various constructs generated from the participants' words. The elements can be different people, facets of the self, feelings, situations, types of jobs or any other objects, events or individuals in his or her world (Fransella & Adams, 1966; Fransella et al., 2004; Winter, 1992). Nonetheless, the issue of range of convenience should be considered when choosing elements for the research (Fransella et al., 2004). This means that in order to prevent a distorted picture of one's personal constructs, researchers should be careful that the elements chosen are within the range of convenience to be representative of the field under investigation, and make the elements relevant to the participants. Applied to the current study, it is my responsibility to exercise caution in choosing all the elements so that they are relevant to the participants' lives, as some professional terms might need to be altered.

One can elicit a number of constructs by asking the participants in what way two of the elements are alike and different from a third. That is, ask them which is the odd one out and why. The

researcher or clinician can then attempt to elicit the contrast pole of the construct according to the answers provided by the participants. The contrasts generated would then be considered as one of the significant themes or constructs that the individual uses to organise, interpret and approach the world (Neimeyer, 2002). Then, the procedure will be repeated with another triad of elements until a sufficient number of constructs has been elicited (Winter, 1992). Based on the grid, implicit maps of how individuals view mental illness and professional psychological help can be generated in order to facilitate their and my understanding of how they construct these concepts, and help the participants be clearer about the topic in question and the researcher to generate concrete and relevant follow-up questions in later interviews efficiently. As can be seen, the repertory grid technique can correspond to and be combined with the whole research interview process for its idiographic characteristics, and may be able to allow both the participants and the researcher to uncover unique dimensions of an individual's outlook.

Dependency grid. The dependency grid was originally described by Kelly as the Situational Resources Repertory Test (Fransella et al., 2004). Participants are asked to relate situations to people or resources in this grid form. According to Kelly's instruction to his client in conducting a dependency grid:

"You might list only the catastrophes in your life and then ask yourself which of the persons you had named could, if they had been available at the time, have been helpful to you in each emergency. Such a matrix provides information about one's allocation of his interpersonal dependencies – whether he has faced difficulties in which he feels no one could be of help, whether he has turned to one or two persons only for all kinds of help, or whether he is indiscriminate in his selection of persons upon whom to depend. (Kelly, 1961, p. 227)"

As can be seen in Kelly's instruction, the situations are actual or imaginary situations encountered by the participants, and are essentially stressful or may have induced strong feelings. The people are those from whom we may seek help or on whom we depend (Kelly, 1969).

More specifically, the participant will be presented with a list of role titles and various

relevant problematic situations. The participants can provide names for the role titles if appropriate, and also their own authentic concerning events. Subsequently, the participants will be asked to recall or imagine which role they might turn to if the resource had been available when the event happened or happens in the future. For example, in the current study, the researcher asks the Taiwanese mothers to recall or imagine life situations in which they had experienced or may experience emotional disturbance. By asking them to remember or imagine what kind of resources they will turn to when facing these difficulties, the selection and preference of resources among Taiwanese mothers can be revealed. In order to facilitate the process, the researcher would name a few examples shared during the interviews or mentioned by other Taiwanese mothers in previous interviews. The current study incorporates the dependency grid technique to allow participants initially to start thinking about their common strategies when facing difficulties, and the perceived role of professional psychological help.

Self-characterisations. The technique of self-characterisations was originally developed by Kelly (1955) as an idiographic narrative sketch and written assessment that allows the respondent to explore self-constructs (Winter, 1992). It consists of a character sketch written in the third person in which the client is asked to take a broad view of himself or herself. Kelly's (1955) original instructions for the self-characterisation are the following:

In the space that follows, please write a character sketch of John Smith, just as if he were the major character in a book, movie or play. Write it as it might be written by a friend who knew him intimately and sympathetically, perhaps better than anyone really could know him. Be sure to write it in the third person. For example, start out by saying, 'John Smith [...]'

The absence of a concrete outline for the self-characterisation is intentional because having structured the client with too many guidelines may result in a considerable loss of spontaneity and a failure to discover the respondent's own conceptualisation of themselves (Winter, 1992). A major advantage of these characterisations is that they are extremely flexible and may be adapted in various ways to meet the particular needs of the clinician or researcher. Application of this technique to the

current research takes place by asking the participants to describe verbally, in a manner naturally incorporated in the interview, instead of writing, a scenario where someone is facing the choice of seeking professional psychological help in the third-person perspective. The focus is on how they describe that someone in their own words. In doing this, self-characterisations acts as a technique in the interview, which will help the participants explore their thinking when considering seeking psychotherapy and counselling.

5.2.3 Procedures

For the purpose of exploring the subjective world of Taiwanese mothers, in particular how they view emotions, psychological difficulty and professional psychological help, and how these constructs may relate to one another in their own subjective world, semi-structured interviews combined with Kelly's techniques as warming-up activities, including the repertory and dependency grids and self-characterisation, were adopted. At the start of each meeting, the informed consent form was presented to the participants (Both Mandarin and English versions attached in Appendix I and Appendix J). This consists of an introduction to the current study stating its purpose and the ethical rights of the participants. Participants were given some time to read through the document. The researcher also emphasised verbally the important points of their ethical rights, including their rights to withdraw at anytime. All participants were notified that the whole process of the interviews would be recorded for future analysis purposes. If the participants did not have any questions and agreed to participate in the study, they would then be asked to sign the informed consent form.

The whole interview was designed to flow from general to personal, including the order of sections and the sequence of interview questions. The interview questions were designed to be broad, general, open-ended but purposeful and guided along the constructs proposed in the conceptual framework. This was planned in order for the whole focus of the interview to be structured around the exploration of how Taiwanese parents perceive professional psychological help and related concepts including their emotion expressivity, strategies they use to deal with their emotions and their attitudes

towards mental illness. Each interview was composed of four main stages (the formal interview protocol, both Mandarin and English versions attached in Appendix K and Appendix L). The first stage was designed to warm up the participants and to build a relationship between the interviewer and the interviewees. This was achieved by enquiring on their background and their general experiences of parenting. The following three stages all consist of two parts: the first part asked the participants to do small visual and hands-on tasks, such as grids, rather than answering interview questions, and the second part consisted of interview questions which involve the participants verbally conversing with the interviewer and answering questions. At each stage, the task and the interview were related to one another. The aim of this arrangement was to utilise tasks related to the interview questions including the grids and other techniques to provide a chance to activate the participants' mindset into contemplating the questions asked, and provide them with the opportunity to think about the related topic, making it easier for them to answer the interview questions. The second stage of the interview touches upon the focus of the current study and aims at finding out Taiwanese mothers' view on emotion expressivity and their preferred emotion regulation strategies with a warm-up thermometer-like task (attached in Appendix M) and related interview questions. After the completion of the second stage, a 15-minute break was designed. The third stage then addresses Taiwanese mothers' perception of mental illness through warm-up task using Kelly's repertory grid (attached in Appendix N) and related conversation. Finally, the last stage explores Taiwanese mothers' attitudes towards professional psychological help by finding out how they perceive professional psychological services, and establish whether psychotherapy or counselling would be chosen as a strategy in different contexts through a combination of warm-up tasks, including the repertory and dependency grids (attached in Appendix N and Appendix O), leading to the final interview questions at the end. The estimated length of the interviews was around 60 to 90 minutes.

In Phase two, face-to-face in-depth interviews, aided by Kelly's grid technique, were conducted by the researcher with each participant. I endeavoured to arrange the interviews in public yet quiet places to minimise risk and ensure the quality of the interviews. Nonetheless, out of respect for the participants, the locations where the interviews were conducted were eventually determined by

them, in places where they felt most comfortable. This decision was also based on the intention of not choosing researcher-biased sites. Since the interviews were one-to-one, I tried to contain the risk by informing others of my location. All interviews were conducted later transcribed and analysed in Mandarin.

Due to the nature of the interview involving Taiwanese mothers discussing possible sensitive emotional experiences, cautious measures such as attentive listening and assurance of the right to withdrawal were emphasised. Furthermore, in addition to these, the contact information of the researcher and sources of further support were provided to the participants should they need them. Local extended support included information of local hospitals, Teacher Chang Hot Line and Lifeline. One point to be noted is my concern that actively providing information for professional psychological services may be considered as formal referrals, and may cause unnecessary anxiety and concern to mothers. An example of such concern is the following: the interviewer may be perceived as a psychology professional. Actively dispensing information regarding professional support may raise concern in some mothers that they may have divulged personal sensitive information (i.e. evident signs of emotional distress) that the interviewer deemed worthy of concern for further referral. Instead, as mentioned earlier, during the interviews, if conversation touches upon topics that may be sensitive to mothers, I was extra cautious with attentive listening and strive to empathize with them as much as I can. After each interview, I would explicitly enquired if the mother had experienced any degree of discomfort and what could be done to mitigate this. If the support was deemed necessary, then related information for further support would be provided.

5.2.4 The pilot study and adjustments made

In order to ensure the feasibility of this research interview, I conducted a pilot study in Taiwan over the summer of 2015. The final interview protocol (see Appendix K and Appendix L) is the adapted version according to this pilot study. Three Taiwanese mothers who fit the recruitment criteria were recruited through acquaintances to help identify any potential problems with the interview

process. The relevant research materials, including participants' information sheets and consent forms were reviewed by my supervisors. The original research procedure was similar to the one adopted in the formal stage, as presented in the procedure section, namely, a semi-structured interview format aided by techniques developed from Personal Construct Theory aiming at gathering information regarding how Taiwanese mothers might respond differently when imagining themselves or others facing emotional distress. I adjusted the interview procedures according to their feedback, which included the following. The average time to complete the original interview ranged from an hour and a half to two hours with no breaks. This was the biggest concern, as the length caused fatigue to the participating mothers and me. In order to assure ethical principles and data quality, the main adjustments made according to the pilot were inserting a break in the middle of the interview and shortening the interview procedure by cutting unnecessary questions and tasks. This decision was made to make the interview less taxing for both mothers and the researcher.

Upon consideration, inserting a break was deemed better than breaking the interview process in two. This was considered more advantageous for the following reasons. First, scheduling twice with busy mothers would be more difficult than finalising one time with them. Second, although the interview was long, longer times are beneficial for the development of a mutual trusting relationship between the interviewer and interviewees. This may benefit some mothers, as more emotionally sensitive interview questions would be asked at later stages of the interviews. Finally, mothers who are willing to participate may come from different locations. Visiting them once, instead of twice, would be a more economic option in terms of transportation.

The second thing that changed was the emotion expression warm-up task, which required the participants to respond to how they usually expressed different kinds of emotions to different people in their lives. This was changed into asking about different kinds of emotions alone, because investigating how they express their feelings to different people is not a primary focus in the current study. This helped reduce the overall duration of the interview into an acceptable range. The final alteration from the original procedure was the fourth stage of the interview, where repertory grids were used to warm up the participants in exploring their construal of professional psychological help.

Originally, the participants were asked to perform the grid tasks three times: once as the researcher asked them to sort random elements from a general perspective of seeking professional psychological help, the second time as they would when others faced the situation, and finally, a third time when they themselves faced the situation. These three tasks proved to be not as distinctive in my pilot, as mothers often came up with similar constructs repeatedly. It was, thus, clear that doing this repertory grid once would be enough to activate my participants' mindset. Furthermore, separating these three contexts had little contribution to answering the research questions. Therefore, to prevent participants from becoming exhausted and in order to reduce interview times, the participants in the formal study were asked to do the repertory grid task once in the context of themselves using different kinds of resources when facing emotional disturbance beyond their control.

5.2.5 Selection of interviewees from participants in Phase one

With the intention of allowing multiple perspectives to be explored during the interview stage, cluster analysis was conducted to assist with the selection of participants in Phase two. This was chosen because I aim to interview participants who are representative of diverse homogeneous groups based on the data collected from Phase one. This can capture the subjective experiences of people with more typical responses and, at the same time, allow multiple perspectives to be preserved and explored, thus, gaining a more complete understanding. Bearing in mind the aspiration to improve the under-utilisation of professional psychological help in the future, this may unveil both the barriers as well as the facilitators in seeking professional psychological help among Taiwanese mothers. It also facilitates discovering other key factors that are possibly not considered in the proposed conceptual framework. Cluster analysis provides a systematic way to identify participants who are representative by classifying respondents into homogeneous sub-groups.

Two-step cluster analysis considering both the respondents' response pattern on the primary independent variable, "Chinese cultural values", and the dependent variable, "attitudes towards professional psychological help", in Phase one indicated that participants in Phase one can be clustered

into four sub-groups (see Table 5.1, p.119).

Interviewing participants representative of these four sub-groups corresponds to the purpose of Phase two mentioned above:

1. Triangulate and explain Phase one quantitative results further:

Interviews with the typical response sub-groups (a. individuals with high traditionality and negative attitudes towards professional psychological help; b. individuals with low traditionality and positive attitudes towards professional psychological help)

2. Find voices hidden or lost in the representation of the general pattern:

Interviews with the none-typical (neutral/conflicting) response sub-groups (c. individuals with slightly high traditionality and slightly positive attitudes towards professional psychological help; d. individuals with slightly low traditionality and negative attitudes towards professional psychological help)

Luckily, as this result corresponded with experts' recommendation of sample size in conducting IPA research, it facilitated the determination of how many participants should be interviewed. For an IPA study, a sample size around eight participants is appropriate according to Turpin et al. (1997). That means to achieve an appropriate scale of an IPA inquiry that is both practical and inspiring, I can select about two participants from each sub-group found in the cluster analysis. Within those clusters, I first identified those who had willingly agreed to participate in Phase two in the four sub-groups. Among these candidates, I then calculated the mean and standard deviation of each group and identified respondents who were representative of their homogeneous group. To be more specific, I identified a few participants from each group with at least one of the mean scores within one standard deviation from the sub-group mean of attitudes towards professional psychological help and traditional Chinese cultural values. I then contacted the potential participating mothers to

check for their availability through emails or phone calls, according to their preference stated in Phase one. After applying these selection processes, there were still too many eligible participants in clusters 1, 2 and 3, so I followed the maximum variation sampling principle, and considered the potential interviewees' demographic backgrounds. In the end, two Taiwanese mothers from each group were chosen and interviewed to represent people in different groups, except for cluster 4, in which I had difficulty in contacting mothers who were still available. Therefore, I invited one more mother from cluster 3 to participate in Phase two, as this cluster has accounted for the largest proportion in the current sample. I also included one participant with extremely high attitudes towards professional psychological help and one participant with extremely low attitudes towards professional psychological help based on the "PR value" (accumulative percentage relative to the whole sample) of their mean score of attitudes towards professional psychological help. This granted me the opportunity to investigate extreme cases indicated by the quantitative data and the inclusion of an even greater number of multiple perspectives.

Table 5.1. *Background information and clusters of mothers participated in Phase two*

Cluster	Pseudonym	Attitudes	Traditionality	Residence	Oversea experience	Age group	Psychological Help experience	Education	Occupation
1									
Attitudes: 2.6-3.28	Chu	3.03	2.07	Northern Taiwan	None	26-30	yes	Bachelor's degree/ college	Home managing
Traditionality: 1.52-2.22	Yu	2.90	2.13	Northern Taiwan	< 6 months	31-35	no	Master's degree	Medical related
2									
Attitudes: 2.52-3.07	Kao	2.66	3.13	Northern Taiwan	> 3 years	41-45	Yes	Bachelor's degree/ college	Services
Traditionality: 2.6-3.16	Chang	2.56	3.20	Central Taiwan	None	36-40	No	Bachelor's degree/ college	Education related
3									
Attitudes: 1.89-2.33	Wu	2.04	1.80	Southern Taiwan	None	31-35	Yes	Bachelor's degree/ college	Professionals/ Technicians
Traditionality: 2.07-2.95	Chen	2.11	2.00	Southern Taiwan	1-3 years	31-35	No	Master's degree	Education related
	Hsieh	1.99	3.07	Northern Taiwan	None	26-30	No	High school	Services
4									
Attitudes: 1.94-2.56	Wang	2.00	3.47	Southern Taiwan	< 6 months	31-35	Yes	Bachelor's degree/ college	Government employed
Traditionality: 3.26-3.9									
Extreme cases 1	Fang	1.39	1.93	Northern Taiwan	None	36-40	No	Master's degree	Education related
Extreme cases 2	Lin	3.55	1.00	Northern Taiwan	1-3 years	26-30	No	Bachelor's degree/ college	Business

5.2.6 Analysis plan: Interpretative Phenomenological Analysis (IPA)

The main reasons for choosing Interpretative Phenomenological Analysis (IPA) as the analysis framework include the following: a) it corresponds with the epistemological position suited to this stage of my research; b) it answers my research questions; c) it fits the scale of resources that I have at this moment; d) I already have experience in utilising this analysis approach.

IPA's theoretical insights are mainly inspired by and drawn from three philosophical stances: phenomenology, hermeneutics and idiography (Smith, Flowers & Larkin, 2009). Phenomenological philosophy is valuable because it inspires the IPA's core concepts of examining and comprehending human experience and perception. Conversely, hermeneutics has developed further as a philosophical underpinning for interpreting a wide range of texts (basically any sort of text). Finally, IPA is inspired by the philosophical conceptualisation of idiography, the concern with the particular. In contrast to most "nomothetic" psychology, idiography is defined as the attempt to understand the detailed and unique holistic representation of words and actions of an individual's experience (Maykut & Morehouse, 1994).

Developed from the theoretical insights discussed above, IPA is a methodological approach that aims at examining the human lived experience in detail. More importantly, instead of examining predetermined, hypothesised and categorised psychological constructs, it allows for a more open-minded exploration of an individual's experience that is as close as possible to the original expression in that individual's own terms. Thus, the value of IPA lies in attempting to offer in-depth, nuanced understanding of particular instances of the human lived experience. As Smith, Flowers and Larkin (2009) stated, IPA requires a combination of phenomenological and hermeneutic awareness. It is valuable in attempting to get as close as possible to the significant experience of an individual, but it also recognises the inevitability of subjective interpretation for both participant and researcher in the process of making sense of experience. Another core characteristic of IPA is that it has an idiographic sensibility. IPA is committed to making sense of the particular and, therefore, the thorough and systematic in-depth analysis to attend to as many details as possible. As stated by Smith et al.: '[...] a

good IPA study [...] should [...] parse the account both for shared themes, and for the distinctive voices and variations on those themes.’ (Smith et al., 2009, p. 38).

The in-depth explorative nature of IPA has more resonance with my research aim and questions of Phase two. In addition, since it examines the opinion of the current generation of mothers on psychotherapy and counselling in Taiwanese society, my study overlaps with IPA’s idiographic and phenomenological philosophical stance of emphasising the understanding of a particular (cultural) group’s experience and how that experience interacts with their world and shapes their reality. Overall, IPA allows researchers to focus on exploring people’s experiences and/or understandings of particular phenomena or individuals’ perceptions and views. IPA values an open mind from the part of the researcher towards their subjects (experiences, understanding and perceptions). My research questions for Phase two are consistent with IPA’s philosophy of investigating phenomenological material, while its adherence to the detailed examination of lived experience matches the depth I expect from my study on the current generation of Taiwanese mothers’ attitudes towards psychotherapy and counselling in the Chinese cultural context.

5.2.6.1 Transcribing and analysing under the Interpretative Phenomenological Analysis (IPA) framework

Through my experience of using IPA in my MPhil project, I found IPA useful in the sense that it helped me see, understand and interpret participants’ statements in a holistic and systematic way. The words are not only interpreted based on their content but also linguistically and emotionally. This is useful because how we understand others and express ourselves is sometimes through non-verbal gestures and patterns in our statements. In this case, it is not just about the content of what we say but how we say what we say, and IPA offers a framework for me to understand the participants’ subjective world holistically. This is also why I put a lot of effort into transcribing all ten interviews, striving to record and preserve all their precious characteristics. In order to conduct IPA, one requires a verbatim record of the data collected. The main purpose of the transcribing stage is to transform the orally presented materials collected in my interviews with ten Taiwanese mothers into written texts for later

analysis using the IPA framework. In this process, I strove to preserve the original meanings as close as possible as when they were stated in the interviews. The normal convention when using IPA is to transcribe the entire interview, including the accounts of everyone present in the interview. Therefore, it was necessary to record all the interviewees' statements and the interviewer's questions and responses. The level of transcription in IPA is mostly at the semantic level (Smith & Osborn, 2007). That is to say, as analyses in IPA mainly focus on interpreting the meaning of the participants' accounts to gain a better understanding of their experiences, it does not require the researchers to transcribe in much detail the prosodic features of the conversation, as often favoured by conversation or discourse analysis (Smith et al., 2009). That being said, although the exact length of pauses and all the non-verbal utterances may not necessarily be recorded in the IPA transcript, generally the transcript still includes records of notable non-verbal utterances such as laughter, significant pauses, false starts and hesitations (Smith & Osborn, 2007; Smith et al., 2009). In IPA conventions, however, these records will be represented as "notes" rather than a coded "representation" (Smith et al., 2009), such as in notation systems like the Jeffersonian Transcription Notation (Jefferson, 2004). Often in IPA studies, researchers use the symbols [] or () to insert notes about any notable reactions, as mentioned above. Both English and Mandarin IPA studies (e.g. Newton, Larkin, Melhuish & Wykes, 2007; Kao & Huang, 2014; Wang, Lee & Lu, 2016) adopt this convention of transcribing. Therefore in the current study, I followed this convention to transcribe all ten interviews.

5.2.6.2 Analysis journey

Following the analysis model and detailed comprehensive steps of the analytic stages provided by Smith et al. (2009), I started my journey of analysis. The stages suggested in the model, with detailed explanation of each step of the analysis, were useful in guiding me in my exploration and attempts of making sense of the ten Taiwanese mothers' experiences. The steps and procedure followed in the analysis are described below according to the process outlined by Smith et al., (2009). Two things should be noted. Firstly, although the steps are presented in a sequence, and although my analysis was indeed guided by this sequence, these steps were actually iterative to make sure that my

analysis and interpretation can be grounded in my data. Being aware of and reflective about the fact that this stage of my research came after the examination of my proposed conceptual framework is very important to me. Although the aim of this stage is to find out the underlying rationales for the mechanisms found in Phase one, it is important to me to remain open in both interviewing and analysing. Being aware of this, I believe, is a constant reminder for being open to new possibilities, insights and any surprises during interviews and analysis.

Immersion in the data

In the first stage of my analysis, I aimed at familiarising myself with the data as much as possible. To put it in specific terms, after data collection, each audio recording of the interview was listened to and transcribed carefully, recording not only the text but also emotions expressed and linguistic characteristics for later careful hermeneutic analysis. Analyses of the interview data were carried out in Mandarin. Therefore, the analysis journey actually began when I started or even before transcribing each interview. The recording of each interview was listened to before moving into the transcription stage. All interviews were transcribed by myself. This also helped me in re-familiarising myself with my data. Recordings were listened again after transcription and while reading the transcripts for each mother, in order to increase familiarity and check whether there was anything omitted during the transcription. Doing so, granted me multiple opportunities to engage actively with the interview, and remind myself of the intra- and inter-personal contexts of the interviews. In this process, I prepared myself for the later stages of analysis, where I strove to make sense of each Taiwanese mother's views and experience.

Initial noting and emergent themes

Smith et al. (2009) suggested that this stage of analysis can be done on three levels to make sense of the interview, namely descriptive, linguistic and conceptual levels. Each interviewed Taiwanese mother's transcript was carefully read through individually at this stage, and sometimes alongside listening to the recording again to make the context more vivid for interpretation. Initial comments on the descriptive, linguistic and conceptual characteristics of the interviews were recorded according to the flow of the interviews during immersion. Also, I kept a record of my own reflective

notes about anything that was interesting or significant. Doing so also helped me in striving for reflexivity during analyses.

Subsequently, exploring the initial notes at a higher level of abstraction led to the discovery of emergent themes. Emergent themes were constructed by considering the inter-relationships, connections and patterns in my initial exploratory notes in an effort to reduce the volume of detail, while maintaining complexity for each participant. The emergent themes were often phrases that represented the conceptual meaning of an emergent pattern within each participant interview. In order to uphold the ideographic stance and maintain particularity in using IPA, this process was carried out separately for individual cases, and I am open to finding out new themes for each case (see Table 5.2, p.126 for an example of the analysis process).

Developing sub-ordinate and super-ordinate themes across cases

In this stage of the analysis process, I aimed at looking for both patterns and uniqueness across all Taiwanese mothers' experiences. A table consisting of all emergent themes along with key extracts was produced for all participants. Emergent themes were reordered to help me establish links, patterns and contrasts between them. This process of reordering, reconfiguring and finding connections and particularity continued throughout the process of analysis and writing-up of the findings. Sub-ordinate themes were eventually developed through the initial emergent themes, which were grouped into different clusters at a further level of abstraction. Subsequently, through exploring the connections between these series of related themes, super-ordinate themes were conceptualised and created.

Translation of the extracts

The whole process of transcribing and analysing of the interview data was conducted in Mandarin, my mother tongue, while translation of some extracts from Mandarin to English only occurred at the writing-up stage for the purpose of presenting my findings. This was to avoid the potential limitation of losing the original meaning in the process of translation. As Van Nes, Abma, Jonsson and Deeg (2010) recommended in their paper discussing the challenges of language differences researchers face in qualitative research, staying in the original language for as long and for as much as possible reduces the loss of meaning in translation. They also suggested inviting a translator

for the translating process in order to preserve the intended meaning and its context in the original source language to the maximum degree. I strove to achieve this through the help of a bilingual clinical psychologist and an experienced professional translator due to their specialty in the research topic and their language competency. I selected a total of ten extracts to discuss with the clinical psychologist and the translator. In our discussion, we translated the extracts jointly and talked about possible alternative wordings and different, linguistically correct, translations, until we reached a consensus. I, then, translated all the key extracts presented in the dissertation by myself bearing the consensus achieved in that discussion in mind due to my familiarity with the context in which the conversation happened, and the time and funding limitations.

Table 5.2. *An example of the analysis process (translated). (Note: descriptive comments are in regular text, linguistics comments are underlined and conceptual comments are italicised. Reflective notes are in bullet points, and sentences in grey background are key extracts/quotes)*

Emergent theme	Original transcript (extracts in grey background may be used as key quotations)	Initial noting (exploratory comments)
Expressing certain emotional states is not functional	<p>(After completing the thermometer of emotions warm-up task)</p> <p>Me: Thank you! Do you think it is hard to decide?</p> <p>Hsieh: (I) would need to think about it [Laugh].</p> <p>Me: Oh, ok ok.</p> <p>Hsieh: Because definition is actually truly (has) a very big range. [Laugh].</p> <p>Me: Oh, so you feel the range is very big ?</p> <p>Hsieh: Hmm*, because sometimes in some situations, when you encounter probably something, take (.) <u>surprise</u> for example, when you encounter something, when everyone is <u>surprised</u>, when I am also <u>shocked</u>, you need to have one person to calm down, in order to deal with all things.</p> <p>Me: Oh, so you think probably–</p> <p>Hsieh: (There) is a bit of struggle.</p> <p>Me: Sometimes there is a functional problem?</p> <p>Hsieh: Yes.</p> <p>Me: That is, sometimes you might be very surprised, but you would feel, if everyone is very surprised, no one can deal with the problem?</p>	<p>She thinks that doing the warm-up task requires a bit of thinking, because emotions cover a broad range.</p> <p><u>Interchangeable use of surprise and shock</u></p> <p><i>The range she talked about seems to be the range of contexts in expressing emotions. Also, this means that questions related to the expression of emotions may be influenced by multiple factors and cannot be answered simply.</i></p> <p>● Does this also suggest the openness of my inquiry?</p> <p>She thinks that when something happens, it is necessary to deal with it. And she thinks that being in shock cannot, and being able to calm down can deal with problems.</p>
Expressing fear to children is not appropriate	<p>Hsieh: Yes. Then you say for example like, for example fear it is, in terms of fear (...), in front of children, can you express fear? No! [Laugh] because you are scared, what about your child?</p> <p>Me: Oh, so encountering scary things, but if it involves children, if it is your children, you would feel, if even I express fear–</p> <p>Hsieh: Then what about my children? How do I protect him?</p> <p>Me: Oh, so is it worrying he would feel we can't protect him?</p>	<p><i>Certain kinds of emotions (like shock) are not going to be functional in dealing with and handling things and problems. Therefore, this may suggest her beliefs that in some contexts, staying in the experience of emotion is not helpful in dealing with things. Also, this implies that sometimes emotions are not the primary consideration.</i></p> <p>She thinks that it is inappropriate to express fear in front of children, suggesting an inability to protect them.</p>
Experience of fear and failure of protecting	<p>Hsieh: Hmm (...) that as well, (I) would also think about, I can't protect him is secondary, it is (I) would also think of, if I encounter something and I am afraid, maybe I encounter this person I am afraid of, then how will this person think of me? He, would think, you are afraid, then isn't my goal achieved?</p> <p>Me: Oh, I see what you mean. So expressing fearful emotions might let others feel aware we are scared of him, then he might have some–</p> <p>Hsieh: Just probably would, (him) pushing further is then possible.</p>	<p><i>This suggests that to Hsieh, expressing certain kinds of emotions (like fear) needs to be considered in terms of the people this emotion is expressed with. If it might incur potential negative consequences, then it may be inappropriate.</i></p> <p>She also thinks that one risks being taken advantage of by people who trigger fear in them if they express fear.</p>
Expressing fear is a sign of weakness	<p>Me: Oh, there is a possibility of this.</p> <p>Hsieh: Right, that is why I said, but you, if in terms of those happy, joy, those are ok. Because those, no matter in whichever situation, I think, everyone has a different personality, I feel my personality is that kind, when happy I will just share my happiness with everyone.</p>	<p><i>Expressing fear might expose oneself as weak to those people with such intentions. In order to prevent further harm, this weakness is better not shown.</i></p> <p>She thinks that sharing positive emotions in any scenario is ok.</p>
No rules for expressing positive emotions like happiness and joy	<p>Me: Oh, so like, happy, this kind of emotions you would be more (.) willing to share with everyone?</p> <p>Hsieh: Right. Because I think, just feel that kind of atmosphere! [Laugh]</p> <p>Me: Hmm, hmm, just let everyone experience a bit (of happiness).</p> <p>Hsieh: Right. So I would say that range is actually pretty big, I need to think about it. [Laugh]</p> <p>Me: So it sounds to me that you think in terms of different emotions and kinds, hmm different kinds of emotions, the way of expressing them would be very different?</p> <p>Hsieh: Yes.</p>	<p>Compared to her previous accounts and examples of negative emotions, it appears that expressing positive emotions requires less caution and rule, and can trigger positive effects on others.</p> <p><i>Signs of complexity in considering the expression of different kinds of emotions to different people, as she expressed different views in terms of expressing different kinds of emotions in different contexts.</i></p>

5.3 Understanding personal views on expressing and dealing with emotional experiences, mental illness and attitudes towards professional psychological help through Taiwanese mothers' eyes

The interviews with ten Taiwanese mothers resulted in a deeper understanding of their attitudes towards professional psychological help and the relevant contributing factors. I will present my findings for Phase two in two sections. Firstly, to understand the context of each interviewed Taiwanese mother, brief summaries of their experience will be given, alongside each Taiwanese mother's profile presented in Tables 5.3. – Table 5.12. This is to provide a general picture of the background and characteristics of each mother. Their general attitudes towards psychotherapeutic support are also included in the Tables. After a glimpse into these Taiwanese mothers' reality, for the second part of this chapter, a cross-case discussion of the emergent themes will be presented. In this section, I present the results from a perspective of engaging in cross-interview analyses, to see if there are any patterns or unique insights among the Taiwanese mothers' accounts. This includes sub-ordinate and super-ordinate themes regarding emotional expressivity, emotion regulation strategies, their attitudes towards mental illness and professional psychological help, how Taiwanese mothers subjectively perceive the relationships between these concepts, and the associations some mothers made between functioning in a Chinese cultural context and these concepts that emerged from our conversation. Other themes relevant to Taiwanese mothers' views of seeking professional psychological help that are additional to my proposed conceptual framework also emerged.

5.3.1 Understanding the context of each participating mother

The selection of these ten Taiwanese mothers through cluster analysis and the maximum variation sampling principle yielded fruitful results. As can be seen in the following, Taiwanese mothers with diverse backgrounds were interviewed, and they offered abundant and insightful personal views, experience and observations on the topic of emotions, mental health and professional

psychological help. Before delving further into the findings from our conversations, short background information and also a summarising table of each interviewed mother are presented to give a sense of who these mothers are and what their general attitudes towards professional psychological help are.

Please note that all names mentioned in the texts and tables are pseudonyms.

5.3.1.1 Wang

Wang's background story and general emotional status

Wang has always worked in medical related fields. At the time of the interview, she works in a school health centre in Southern Taiwan. She seemed to be very satisfied with her lifestyle and workload at the moment, sharing no major stress or emotional disturbance at the time of the interview. Wang has one infant daughter and lives in a nuclear family household with her child and husband. Having said that, her core family maintains a very tight connection with her parents-in law, as she joked about how their house is like a hotel because they frequently spend most of their off-work time in her parents-in-law's house and only go back home near bed-time.

Wang had imagined that children would be difficult, meaning that they might display negative emotions without any specific reason. Her concern was relieved, however, as her daughter is rather easy to deal with. She also said that it is quite fun watching her daughter grow.

Although Wang did not seem to have any emotional distress at the time of the interview, she shared some previous experiences when she might have encountered emotional disturbance. Her old job was in a hospital. Compared to this working environment, her current working stress in the school health centre is much more manageable and she feels more relaxed. In terms of parenting, however, she has some concerns regarding the conflict between her and her parents-in law's parenting styles. She feels she is well supported by her husband, and she would have him communicate with them, making the situation manageable for the moment. In the interview, Wang stated several experiences that might signal possible emotional distress in the past. This included one non-specified situation when she was still a student, and one more recent experience of possible post-partum depression.

Wang's attitudes towards professional psychological help

Wang showed open but sceptical attitudes towards professional psychological help in our conversation. The first thought that Wang had when talking about professional psychological help was that these kinds of services cost a fortune. She had had a consultation once while still a student with

emotional distress. That one-off experience was not very effective in her opinion, as she felt it only provided one additional person to vent emotions. This means that Wang expected more than just being able to release emotions when seeking the help of a psychotherapist. She shared a recent experience of possible post-partum depression where she felt unstable emotion fluctuations after giving birth to her daughter, but had not thought of seeking professional psychological help at that time.

Table 5.3.

The background and general attitude towards choosing psychotherapy and counselling for Wang

Pseudonym	Wang
Cluster	Typical/High traditionality and negative attitudes
Age	31-35
Occupation	Education and health related
Residence	City in Southern Taiwan
Education level	Bachelor's or college degree
Number of children/age	1 / Infant
Mother's emotional distress or difficulty	1. She previously suspected herself of having experienced post-partum depression 2. Nothing major at the moment
Children's emotional distress or difficulty	1. Hysterical and non-stop crying without any obvious reason sometimes 2. Sometimes being frightened and awakening from sleep, and having trouble sleeping soundly
Past experience of emotional difficulty	1. She suspected herself of having experienced post-partum depression 2. Past experience with emotional distress beyond her own control
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	Yes
Willingness to seek psychotherapy and counselling	Positive with suspicion, will consider as a last resort
Positive attitudes towards psychotherapy	Nothing explicitly expressed
Negative attitudes towards psychotherapy	Doubts about the effectiveness of such services

5.3.1.2 Yu

Yu's background story and general emotional status

Yu is a working mother who has two young children, one toddler and one newborn. Her work involves providing professional psychological help in a hospital, specialising in the field of child development. She also sometimes performs duties of taking on adult or elderly cases or any duty that concerns mental health.

Yu lives with her husband and her two children on their own, near her family of orientation and her side of relatives. This indicates that she might have access to familial support should she need it. Given the fact that Yu and her husband both need to work during the day, their two children are settled at a babysitter's house when they are working.

As a professionally trained psychologist, throughout our interview, Yu repeatedly demonstrated her strong background in psychology by referring to and using terms that are commonly used in the psychology discipline. For example, when sharing her experience with her own children, she adopted the concept of temperament in describing their different characteristics.

At the time of the interview, the primary issue that was causing Yu's current emotional discomfort was the situation at work, where she feels quite frustrated. Yu feels that society in general does not give professionals the respect they deserve. Also, she feels trapped in a work environment where other professionals question and devalue her professional opinions rather than respect her, seeking mutual collaboration.

Yu's attitudes towards professional psychological help

Evidently, Yu expressed very positive attitudes towards seeking professional psychological help for herself and her children, and by recommending professional psychological help to her friends and family. This may be due to her own educational and professional background, as she demonstrated relatively concrete in-depth knowledge regarding psychotherapy and counselling. Insights on the current barriers towards seeking professional psychological help were elicited from Yu's experience.

Table 5.4.*The background and general attitude towards choosing psychotherapy and counselling for Yu*

Pseudonym	Yu
Cluster	Typical/Low traditionality and positive attitudes
Age	31-35
Occupation	Professional psychological help provider
Residence	City in Northern Taiwan
Education level	Master's degree
Number of children/age	2 / One toddler and one infant
Mother's emotional distress or difficulty	1. She shared that frustration at work can cause emotional distress sometimes 2. Nothing major at the moment
Children's emotional distress or difficulty	1. Hysterical and non-stop crying without any obvious reason sometimes 2. Sometimes being frightened and awakening from sleep, and having trouble sleeping soundly
Past experience of emotional difficulty	1. Past experience with intensive emotional disturbance
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	Yes
Willingness to seek psychotherapy and counselling	Yes
Positive attitudes towards psychotherapy	Positive with practical considerations
Negative attitudes towards psychotherapy	Nothing explicitly expressed

5.3.1.3 Wu

Wu's background story and general emotional status

Wu is a mother to three teenage girls. She got married and had children relatively young compared to the rest of the participating mothers. She currently works in a factory in Southern Taiwan. Wu also had experience in education especially for young children in the past.

Like many other married women in Taiwan, Wu lives with her husband, children and family-in-law. She mentioned with some disapproval that the reason for having three children was due to the traditional values of her mother-in-law, who wanted a grandson in the family. In her accounts, she cared very much for her daughters, and held a close relationship with them treating them as friends.

During the interview, Wu did not show any sign of emotional distress. She had, however, considered seeking professional psychological help for herself due to the conflict between herself and her husband and his family, which seemed to be the primary cause of emotional disturbance in her life. Also, she shared that she recently considered seeking a child psychologist for her youngest daughter, as she seemed to be going through her rebellious stage. Throughout our conversation, Wu repeatedly mentioned examples of emotional distress resulting from her interaction with her family-in-law. She felt upset for not being able to disagree directly with their beliefs and values, and for not being given the respect she deserved from them.

Wu's attitudes towards professional psychological help

Wu held, at the same time, a positive and hesitant outlook towards professional psychological help. Although she acknowledged some positive aspects of seeking professional psychological help, her attitude towards seeking psychotherapy or counselling for herself and her children seemed to be hesitant due to both external and internal concerns. She showed willingness to recommend psychotherapy or counselling to friends and family in need and to seek such help in the future for her and her children when deemed necessary. She also explicitly acknowledged other positive values of professional psychological help, such as its professionalism, its capability of figuring

out where the problem is and its effectiveness in providing a different perspective. When sharing past experiences, however, she mentioned that once, when she considered seeking professional psychological help, she ultimately decided against it and restrained from doing so at that time.

Table 5.5.*The background and general attitude towards choosing psychotherapy and counselling for Wu*

Pseudonym	Wu
Cluster	Non-typical/Moderate traditionality and negative attitudes
Age	31-35
Occupation	Factory technician
Residence	City in Southern Taiwan
Education level	Bachelor's or college degree
Number of children/age	3 / All teenagers
Mother's emotional distress or difficulty	1. She repeatedly mentioned conflicts with her family-in-law and her husband 2. Nothing major at the moment
Children's emotional distress or difficulty	1. Her oldest daughter shows potential signs of anxiety 2. Her youngest daughter is in a rebellious phase
Past experience of emotional difficulty	She shared that she used to be distressed due to her relationship with her husband and his family
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Positive with concerns and doubts
Positive attitudes towards psychotherapy	Yes
Negative attitudes towards psychotherapy	Some doubts about its effectiveness and concerns for others' stigmatisation of such service

5.3.1.4 Lin

Lin's background story and general emotional status

Lin is a young mother with a two-year-old daughter. Her focus in life at the time of the interview was taking care of her toddler and at the same time starting to run her own business. She travels a lot between two cities: her hometown, where she can find help from her family of orientation to take care of her daughter, and the one she currently lives in with her husband and child.

At the time of the interview, Lin did not show any significant emotional distress. Her primary concern was the balance between her own personal needs and her child's demands on her time. She also mentioned that she was concerned about whether her parenting style was right or not.

Lin's attitude towards professional psychological help

She shared awareness of her own transition to being more accepting and open towards professional psychological help. Overall, she expressed extremely positive views towards professional psychological help at the time of the interview. Lin is one of the few interviewed mothers to maintain that people do not have to be mentally ill to seek professional psychological help. Lin thinks that one can seek professional psychological help under several circumstances. When one is under emotional distress, unable to control emotions, ill, unhappy, when one needs to talk to someone or doesn't know who to talk to, or when one has unresolved personal issues. This indicated her thinking that this form of help is quite common and is not necessarily associated with mental illness, which may be severely stigmatised.

Although clearly aware of the possibility of being misunderstood should she accept professional psychological help, Lin still holds very positive attitudes towards it. She stated that resolving personal issues and being able to live life is more important, and that she does not care that much how others think of her.

From the interview, it was clear that Lin saw professional psychological help as having multiple positive values. Experienced psychologists can provide concrete professional advice, solutions and also they can help one see from other perspectives.

Table 5.6.*The background and general attitude towards choosing psychotherapy and counselling for Lin*

Pseudonym	Lin
Cluster	Typical/Low traditionality and positive attitudes (most positive attitudes)
Age	26-30
Occupation	Housewife and entrepreneur
Residence	City in middle Taiwan
Education level	Bachelor's or college degree
Number of children/age	1 / Toddler
Mother's emotional distress or difficulty	1. She is somewhat bothered by finding balance between her own needs and those of her daughter 2. Nothing major at the moment
Children's emotional distress or difficulty	She observed that her daughter may have bad temper and signs of behavioural problems (throwing things), but is not concerned
Past/current experience of emotional difficulty	She feels that being impatient and emotional with her daughter bothers her
Consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Positive
Positive attitudes towards psychotherapy	Yes
Negative attitudes towards psychotherapy	No

5.3.1.5 Hsieh

Hsieh's background story and general emotional status

Hsieh is a single mother working in the financial department of a hospital. She lives in a rather core household with her family. Hsieh's son is a teenage boy with a developmental condition. Hsieh calls him a child from the stars. She shared with me that because her son's condition requires special care, so she needs to worry more.

At the time of the interview, Hsieh did not exhibit any distressing emotions. She shared some personal concerns that might have raised emotional discomfort for her in the past. These include problems encountered at work, family issues, such as marriage problems or bankruptcy, and health problems.

Hsieh's attitude towards professional psychological help

In terms of her attitude towards professional psychological help, it appears that she has fluctuating and conflicting views towards such services. She showed fairly consistent and very positive attitudes towards her son seeking professional psychological help. As for professional help for herself and for others, however, even those that are mentally ill, she fluctuated between doubts and positive thoughts. This might be related to her past experience with psychological help and her personal view of the concept of mental illness.

In Hsieh's interview, I observed the importance of the impact of past relevant experience on attitudes towards professional psychological help. She had had one bad experience with one professional in the past, where they seemed impatient and established distance with Hsieh. As a client, she felt that her words were not valued and respected and that she was expected to just follow the professional's instructions. In observing her son's experience with professional psychological help, however, her view was very positive following from her son's positive reaction. Both these experiences seem to be connected to her current attitudes towards professional psychological help. While she holds extremely positive attitudes towards seeking professional psychological help for her child, and

acknowledges various positive values of psychotherapy and counselling in general, she showed a very inconsistent attitude overall towards seeking professional psychological help for herself.

Table 5.7.*The background and general attitude towards choosing psychotherapy and counselling for Hsieh*

Pseudonym	Hsieh
Cluster	Non typical/Moderate traditionality and negative attitudes
Age	26-30
Occupation	Financial related duty
Residence	City in Northern Taiwan
Education level	High school
Number of children/age	1 / Teenager
Mother's emotional distress or difficulty	1. She shared several life predicaments that may have caused her emotional distress, but did not explicitly express any emotional distress 2. Nothing major at the moment
Children's emotional distress or difficulty	Her son has a developmental condition, and she feels that he is very dependent on her. She did not explicitly share any emotional difficulty for her child
Past experience of emotional difficulty	She mentioned that there must have been times when this happened, but she did not specify
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	Yes/Negative experience with such help for herself
Willingness to seek psychotherapy and counselling	Positive, with doubts and conflicting attitudes
Positive attitudes towards psychotherapy	Yes
Negative attitudes towards psychotherapy	Yes

5.3.1.6 Kao

Kao's background story and general emotional status

Kao has two sons, one in primary school and the other in middle school. She was divorced and is now living by herself. At the time of the interview, she was in between jobs. She had experience in various kinds of work, including education related career and her own business. She is also very devout and religious.

Although she did not display any explicit emotional distress at the moment of the interview, we did spend relatively more time focusing on Kao's personal experience and concerns during the interview. Her primary concerns that might cause her distress more recently are mostly related to the subsequent effects resulting from the divorce. Kao's children are under the care of her ex-husband. She struggled with finding a way to communicate with her ex-husband about several issues regarding their children. Based on this, she was considering legal action should her ex-husband keep refusing to communicate with her properly.

Kao's attitude towards professional psychological help

In general, being aware of the positive values of professional psychological help, Kao showed that she is rather open towards professional psychological help for herself and her children if needed, while being aware that there are some people who might not be willing to seek such help in current society. Seeking professional psychological help suggests being willing to acknowledge one's weaknesses and face one's problems. Kao considers this a good sign, and better than not being able to face one's problem with honesty.

Table 5.8.

The background and general attitude towards choosing psychotherapy and counselling for Kao

Pseudonym	Kao
Cluster	Non-typical/High traditionality and rather positive attitudes
Age	41-45
Occupation	Currently unemployed
Residence	City in Northern Taiwan
Education level	Bachelor's or college degree
Number of children/age	2 / One teenager and one school age
Mother's emotional distress or difficulty	<ol style="list-style-type: none"> 1. Being anxious regarding the separation from her children 2. Distressed about the shift in her role in society 3. Being perplexed about relationships 4. Though not explicitly expressing any sign of major emotional distress at the time of the interview, she was however very likely to be having some emotional distress because of her ongoing problems in life
Children's emotional distress or difficulty	She thinks she has observed some signs of emotional distress but did not elaborate on them, as her children may not feel comfortable sharing them
Past experience of emotional difficulty	<ol style="list-style-type: none"> 1. In distressed mood because of her ex-husband 2. Behavioural and emotional change
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Positive with suspicion, will consider as a last resort
Positive attitudes towards psychotherapy	Yes
Negative attitudes towards psychotherapy	Nothing explicitly expressed, but aware of the possible negative attitudes in society

5.3.1.7 Chu

Chu's background story and general emotional status

Chu is currently a housewife living in a nuclear family household with her husband and toddler son. There are special circumstances surrounding this interview that need to be mentioned. Chu brought her son, her husband and one friend along with her to the interview in a restaurant. Therefore, there were some interruptions during the process of the interview as they were having lunch at the same time.

During the interview, Chu did not seem to have any serious emotional disturbance. Her concerns were mostly related to her child. For example, she was frustrated with parenting, and feeling tired due to tending to her son and house chores simultaneously, or the responsibility of taking care of her son even if she was feeling sick.

Chu's attitude towards professional psychological help

Chu thinks that she has relatively positive attitudes towards seeking professional psychological help should the problem be serious enough and beyond her capability to deal with. She, however, also talked about practical considerations such as cost, accessibility and the time needed to do so.

Table 5.9.

The background and general attitude towards choosing psychotherapy and counselling for Chu

Pseudonym	Chu
Cluster	Typical/Low traditionality and positive attitudes
Age	26-30
Occupation	Housewife
Residence	City in Northern Taiwan
Education level	Bachelor's or college degree
Number of children/age	1 / Toddler
Mother's emotional distress or difficulty	1. Frustration with parenting and the responsibility of being a parent 2. Nothing major at the moment
Children's emotional distress or difficulty	Experience of non-stop crying that can become out of control
Past experience of emotional difficulty	1. She has experienced severe work stress 2. Past experience with emotional distress beyond her own control
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Positive with some concerns
Positive attitudes towards psychotherapy	Yes
Negative attitudes towards psychotherapy	Nothing explicitly expressed, but aware of the possible negative attitudes in society

5.3.1.8 Chang

Chang's background story and general emotional status

Chang is a mother of three children, aged from infancy to adolescence. She lives in an extended household comprising three generations under the same roof, namely she lives with her husband, children and her family-in-law. She is a teacher of young children and also doubles as a subject teacher.

Chang did not show any signs of serious emotional difficulty at the time of the interview. Her primary stressors were from work. She felt as if she were always on call, because she needs to take care of junior students. She also mentioned coordinating conflicts between parents as a context that might elicit emotional discomfort for her.

Chang's attitude towards professional psychological help

Chang indicated that she is open to seeking psychological help should such service is accessible. From the conversation, however, conflicting attitudes were revealed as she has some doubts regarding psychotherapy and counselling. While she expressed being open towards seeking professional psychological help, at the same time, she considered such help as a last resort.

She also showed evident doubts regarding the effectiveness of psychotherapy and counselling. Chang mentioned that if psychotherapy alone was useful, then medication would not be needed when treating mental illness, but in her mind medication was the fastest solution. She also mentioned that, to her knowledge, there is a time limit for each psychotherapy session, and this implies limited understanding of the concerns of the patients. Furthermore, in her experience, she is not familiar with any successful cases of patients being treated by mere psychotherapy. Therefore, the effectiveness of professional psychological help was doubted.

Nevertheless, she also talked about the significance of what a psychotherapist can achieve. She once saw a video that showcased the powerful influence a psychotherapist might have on an individual. Although negative, as in the end of that video the individual committed suicide, it led Chang

to believe that personal psychological help can bring significant change to one's mindset. Therefore, I think that she seems to be oscillating between her doubt for and her trust in the effectiveness of professional psychological help.

Table 5.10.*The background and general attitude towards choosing psychotherapy and counselling for Chang*

Pseudonym	Chang
Cluster	Non-typical/High traditionality and rather positive attitudes
Age	36-40
Occupation	Education
Residence	Rural area in middle Taiwan
Education level	Master's degree
Number of children/age	3 / One infant and one teenager
Mother's emotional distress or difficulty	1. Showing signs of work stress 2. Nothing major at the moment
Children's emotional distress or difficulty	None
Past experience of emotional difficulty	Yes, but did not specify
Past consideration of using psychotherapy and counselling	No
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Conflicting with strong suspicion, will consider as a last resort
Positive attitudes towards psychotherapy	Nothing explicitly expressed
Negative attitudes towards psychotherapy	Doubts about the effectiveness of such services

5.3.1.9 Chen

Chen's background story and general emotional status

Chen is teacher in a Southern city in Taiwan. She has a nuclear family, and lives with her two kindergarten-age daughters and her husband. She is very close to her family of orientation and goes to her parents' house for dinner every evening. Her biggest concern is her children's education, which she considers a huge responsibility.

Without demonstrating any significant emotional disturbance at the moment of the interview, she did share her experience of potential post-natal depression. She also listed a few contexts that might raise emotional discomfort for her, including frustration at work, parenting issues, physical illness, and interpersonal and moral conflicts.

Chen's attitude towards professional psychological help

Chen showed rather open and positive attitudes towards seeking professional psychological help, while being aware of some general unwillingness to use such services in the past and also in contemporary society. Her accounts also showed that she thinks seeking professional psychological help is not strictly associated with being mentally ill. She shared her observation of the generation differences in the attitudes towards professional psychological help and the transition of her own attitudes.

As a primary school teacher, she observed that parents nowadays are more open to using professional psychological help for their children. People used to be unwilling to seek related help in the past, but are becoming more and more accepting of these kinds of services. This under-utilisation may also be due to lack of accessibility, and people not paying attention to their mental health. In her opinion, unwillingness to seek professional psychological help may be associated with unwillingness to analyse oneself, the perceived discrepancy between cost and benefit, the undesired association with the label of mental illness, and beliefs in suppressing emotions.

Table 5.11.

The background and general attitude towards choosing psychotherapy and counselling for Chen

Pseudonym	Chen
Cluster	Non-typical/Moderate traditionality and negative attitudes
Age	31-35
Occupation	Education
Residence	City in Southern Taiwan
Education level	Master's degree
Number of children/age	2 / Both pre-schoolers
Mother's emotional distress or difficulty	1. She previously suspected herself of having experienced post-partum depression 2. Nothing major at the moment
Children's emotional distress or difficulty	Sometimes experiencing non-stop crying but not willing to share any specific reason
Past experience of emotional difficulty	She suspected herself of having experienced post-partum depression
Past consideration of using psychotherapy and counselling	Yes
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Positive with some concerns
Positive attitudes towards psychotherapy	Yes
Negative attitudes towards psychotherapy	Nothing explicitly expressed, but aware of possible negative attitudes in society

5.3.1.10 Fang

Fang's background story and general emotional status

Fang is a teacher with abundant teaching experience. She currently lives in a nuclear family household with her two children and her husband. From my interview with her, I can tell that she is very motivated in her work, and that she finds it very meaningful. She shared that she is partial to the adoption of unconventional teaching styles, and manages her class in a less traditional and conservative way.

During our conversation, Fang spent a lot of time sharing with me her life experiences. These consisted of three major events in her life that have caused distress in the past. She had experienced the loss of loved ones. She also experienced the breakdown of a relationship with a trusted good friend, and the associated feelings of betrayal. Finally, she shared a more recent conflict in which she was harassed and attacked. In spite of these seemingly stressful and distressing past experiences, she seemed not to be displaying any major emotional distress at the time of the interview. She was able to describe these to me in a rather peaceful way, as she was thoroughly over the negativity of these past experiences, having found renewed social support from her family and current colleagues.

Fang's attitudes towards professional psychological help

She showed evident doubtful attitudes towards seeking professional psychological help, drawing from her observation that her sister sought relevant help, which yielded no effect. She also believes that seeking professional help is indicative of the severity of the problem, and the lack of close-knit social resources. She compared the individualistic perspectives on psychotherapy and counselling of the Western world with those within Taiwanese society, and suggested that people in Taiwan devalue their emotions and have too much social burden; therefore, they would value psychotherapy and counselling less.

Table 5.12.*The background and general attitude towards choosing psychotherapy and counselling for Fang*

Pseudonym	Fang
Cluster	Extreme case with negative attitudes Non-typical/Rather low traditionality and rather negative attitudes
Age	36-40
Occupation	Education
Residence	City in Northern Taiwan
Education level	Master's degree
Number of children/age	2 / School age
Mother's emotional distress or difficulty	Expressed nothing major at the moment, but had encountered several significant events in the past
Children's emotional distress or difficulty	Did not talk about this
Past experience of emotional difficulty	1. Strong frustration and brief suicidal intention when losing a closed one in her life 2. Feeling of hurt during conflict with a friend 3. Distressed due to conflict in work
Past consideration of using psychotherapy and counselling	No
Past experience of psychotherapy and counselling	No
Willingness to seek psychotherapy and counselling	Consider as a last resort
Positive attitudes towards psychotherapy	Nothing explicitly expressed
Negative attitudes towards psychotherapy	Yes, repeatedly expressing reluctance in seeking such help, and doubtful attitudes

5.3.2 Super-ordinate and sub-ordinate themes across interviews

Integrating all emergent themes from each Taiwanese mother's account, super-ordinate and sub-ordinate themes grouped by relevance are presented in this section to show recurring patterns and unique perspectives across the interviews. Interpretations were made through both inter- and intra-case exploration using the IPA framework. These include themes regarding Taiwanese mothers' attitudes towards professional psychological help and mental illness, and their views on emotional expressivity, emotion regulation strategies, and how they subjectively perceive the relationships between these concepts in the Chinese cultural context. New, additional emergent insights concerning other themes relevant to Taiwanese mothers' views of seeking professional psychological help are also presented. The following presentation of results is structured by super-ordinate theme, with each related and nested sub-ordinate theme explored further.

5.3.2.1 Chinese cultural context and attitudes towards seeking professional psychological help

As can be seen throughout this chapter, different forms and levels of cultural understanding and awareness among Taiwanese mothers were observed. In some cases, Taiwanese mothers would explicitly offer examples of specific Chinese cultural values or beliefs that have certain implications on their or other people's thinking or behaviours regarding the topic in question. In other cases, they might provide observations on the differences between Taiwanese and Western societies to manifest their understanding of cultural differences. A lot of the times, they talked about how previous generations thought, as a representation of their views on the implications of Chinese cultural values. For example, when Taiwanese mothers talked about culture, very often they associated it with past generations, especially through describing how their parents and parents-in-law thought. Interestingly, in the case of views regarding professional psychological help, it is relatively rare that Taiwanese mothers talk about any specific Chinese traditional cultural values explicitly when asked about their attitudes or willingness to seek professional psychological help in the interviews. It is quite often,

however, that in conversation with them, I found that the Chinese cultural context did play a role in many Taiwanese mothers' thinking about how professional psychological help is viewed in current Taiwanese society through comparisons with other cultural context and the previous generation.

Comparisons to other cultural contexts

Quotes are presented here to show how some Taiwanese mothers perceive the differences in terms of seeking professional psychological help in different cultural contexts.

The following extract from my conversation with Wang, about whether she thinks her views about seeking professional psychological help are related to her functioning within a Chinese cultural context, showed that she thinks professional psychological help may be considered differently in other cultural contexts.

Me: [...] then what do you think of our attitudes towards psychotherapy and counselling, that is, whether to think of them [psychotherapy and counselling], or whether you would want to seek this kind of help, [does it] have anything to do with us being in a Chinese cultural context?

Wang: Yes. Hmm...because I think this is still...more...popular overseas? Because you see in movies it is also, [you] only see counselling plot in foreign films ah. You seldom [see] this thing come out in our other environments. The information you reach, right, so we Chinese people do not carry out this part, so you naturally, you access less, you naturally less easily think of it. Right.

Similarly, Lin shared her observation that Westerners might be more open to psychological help than people in a Chinese context, who might be more conscious of the social reaction associated with seeking psychotherapy and counselling.

Hmm...because [you] always have been in a Chinese world, so, I think [you] should say...hmm...to Chinese people this thing is more, things that are at a psychological level, they seem more unable to accept. [To one] self...it is just afraid of being gossiped about, right, these, more unable to, view [these] positively. Right, I think, [I] don't know why I just feel Westerners seem more, less that, [do I] watch too many movies? I just think they seek, hmm, psychology doctors and psychiatrists, less like us being like this, just, [it is] possible that you really have this illness yourself, you probably would go [seek psychotherapy and counselling] in a sneaky way or what. They are [with] more open attitudes.

In the below extract, though no specific cultural contexts were discussed, Fang offered her observation that people in Taiwanese society are more conservative about seeking professional psychological help than foreigners. Interestingly, she also associated seeking psychotherapy with the possibility of being perceived by others as having a problem. This association will be elaborated further in later sections.

Yes, Taiwanese people are conservative, right, because foreign countries seem to see psychological doctors very often? However, in fact, Taiwanese people are actually very conservative, and it will feel like, and our profession is this... No wonder many teachers will be depressed. Because our profession is like this... this noble? Or what, how to describe it? It seems that there can be not just a little... So you say why I, I said that when I met the fifth problem, the stress was great. Our profession seems to be unable to make a bit of mistake. Demand for ourselves are very high, and self –expectation is high, can't make one bit of mistake, can't have a bit flaw.

Me: Hmm.

Fang: It is actually very hard [when you] ask someone and ask yourself to be like this..

Me: Hmm hmm hmm.

Fang: It is very perfect, it must be extremely perfect, and there can be no flaws.

Me: So if [you] go to seek psychotherapy, you may be considered by others to be a kind of

—

Fang: You have problems.

Me: It is possible to be considered as having a problems by others ?

Fang: Right.

Comparison with past generations

Repeatedly, especially when explicitly asked about their thoughts on whether cultural background has an impact on attitudes towards psychotherapy or counselling, mothers referred to generational differences as impacting attitudes regarding seeking professional psychological help. For example, Chen, Yu, Lin and Chu all thought that people are more open to and accepting of professional psychological help nowadays.

In the below extracts, Chu made a comparison between the current and past attitudes towards seeking professional psychological help when I asked explicitly whether being in a Chinese cultural context contribute to her views about professional psychological help. Also the potential association between seeking professional psychological help and being stigmatised by others is embedded, and will be later elaborated in another theme.

Me: Oh, ok, understood. Then, do you think us, your views on psychotherapy and counselling, are related to us being in the Chinese culture?

Chu: Hmm...I think the attitudes are getting better now, probably in the past people would feel that that is...is...[for] crazy people (in Taiwanese) to go [to psychotherapy and counselling], right, and then...hmm...probably, [people] used to not know how to find this kind of help, but now is more...just probably there are avocations, and then people would know [one] can go, this is not some big, too big of a problem, like this, more positive, just feel now everyone is more accepting, more positive.

Me: So, hmm, probably feel that the past scenarios are a bit different then than now? And

they now are more able to positively accept. And in the past you would feel –

Chu: [It] is like something that cannot be open, like this, like something that is bad.

Chen shared the following when asked whether cultural background is related to views on seeking psychotherapy and counselling among her family and the parents of children she teaches, She said that in Taiwan, there are traditional ways and alternatives of dealing with mental illness that might be preferred, especially for older generations. In the past, people did not think that mental health mattered. Traditionally, people do not think you can be sick psychologically; instead, people believe more in the influence of bad spirits. Thus, there are some traditional alternatives dealing with mental illness, such as going to the temple and drinking water with burned charms. Therefore, professional psychological help is not deemed as straightforward or as accessible as these traditional alternatives are for some people.

I think yes. We never seem to consider psychological...psychological health is important, so...never think that [you can be] sick psychologically, and...therefore need to go to doctors, right, and then, there are some for example more...different, hmm conditions that are out of order or more different people, for example autism, and that kind of, they...just, hmm...the ways of dealing [with it] are probably more different, don't they sometimes bring them, just go to temple, drink “符水 fú shuǐ” (in Taiwanese, meaning water with burnt charms). It's just, their views on these kinds of things, in fact, they don't think...don't think...[it is] a kind of disorder they think it is probably some kind of “卡到陰 kǎ dào yīn” (influenced by bad spirits). It is just their views are like this, so [it] leads them to think of different ways to solve [the problem]. And when they cannot resolve, they will have to choose to conceal, it's like [they] think...like this is humiliating, and don't let others know, like this.

Later in our interview, her accounts continued to provide insights on differences in viewing professional psychological help in different cultural contexts like presented in the previous section. In

the meantime, different generations may hold different attitudes towards professional psychological help. She attributed this generational difference to the extent of absorbing foreign cultural values.

Well... I think I myself seem to be... Westernised to a great extent, so it feels like it's actually like general, it may be associated with age? It's probably now...the younger generation, because of serious Westernization, so is actually more accepting to this field (psychotherapy and counselling). However, for more elder people, they may be really, in terms of this field they will have different thoughts from us.

While Chen's sharing demonstrated that there might be generational differences in attitudes towards professional psychological help due to adherence to different cultural values, the following quote from Fang showed that how the views from the previous generation can be passed on to the next.

Yes, then... my mom actually, always said, as you know my mother, love face, being a teacher, you go to see that [professional psychological help] ..., what if the school knows? Yes, so I am a bit like my mom. We are less, we are less willing to go, go to that area, it feels like it needs to be very serious or it's really, almost done, so [you] will go, go there. Right, [I] am afraid of being cast a different eye by others.

Furthermore, some mothers thought that the connection between traditional values and attitudes towards seeking professional psychological help was stronger in past generations than today. For example in Yu's opinion, though traditional cultural values do have an influence on attitudes towards seeking professional psychological help in the past, that influence is decreasing according to her observation.

Yu: I think it may have a relationship with culture in the past, but now I feel like it is slowly, it is so so.

Me: Hmm hmm..

Yu: Now it is, now everyone may still be very scared. For example, seeing people who walks on the street and talking to themselves, everyone will still be very afraid. Might not be instantly think of that he/she may just be, just sick. Because I think it is the social news report that will make these people seem to become, very much like an untimely bomb. I think this thing still is there in the society, but in terms of, seeking psychological help, It seems that, generally, its acceptance seems to be getting higher and higher.

Me: Hmm hmm.

Yu: Right, so I feel as if the influence is getting less and less, or is it, or is it that we are also actually, to some extent, accepting a lot of... some Western concepts?

5.3.2.2 Emotion expression rules

Most of the interviewed Taiwanese mothers showed no specific consideration regarding expressing positive emotions. It is evident, however, that most mothers are more cautious when expressing negative emotions. For example, Hsieh thinks that no matter the context, sharing positive emotions is fine.

As another example, when asked about whether some emotions are more inappropriate to share than others, Wang responded without hesitation:

Yes, the negative ones.

Moreover, when asked about the extent of emotion expressivity, almost every interviewed Taiwanese mother wanted to clarify the person to whom their emotions would be expressed. This means that rules of emotion expression are related not only to the kinds of emotions but also to the receiver. Therefore, emergent rules especially for the expression of negative emotions are presented in the following section as a token of the complexity of emotion expression among Taiwanese mothers.

Closeness and emotion expression

There is a pattern among Taiwanese mothers that the closer they feel to an individual, the more comfortable they are to express genuinely their emotions. Conversely, they are inclined to withdraw negative emotion expression with people who are not that close to them.

As Lin shared:

[...] it is definitely most direct with family and partner, because they live beside you, so if something happens, it should most directly impact them. Yes, as for friends, it varies, it depends on our closeness, right [...]

For Chang, even for family, there is difference in closeness. As she stated:

Hmm...Actually for family, it still depends, if it is my husband, all [will be expressed as] one hundred percent. [...] After all, [he] is the closest person. So he should know all of my emotions. As for my parents-in-law, [the extent of expressing emotions] will slightly decrease, you cannot just be angry with them.

Power distance/authority and emotion expression

Mothers who work at organisations responded that they sometimes feel hesitant and more reserved to express negative emotions to their superiors.

Chang said:

[...] even if I am really angry, I cannot express 100% to my superiors right?

[...] yes, sometimes you need to tolerate, after all you are employed, isn't it right?

Elder or younger generations and emotion expression

Some mothers showed concerns when expressing different kinds of emotions to elders or younger generations for different reasons.

Chen shared her thought about expressing fear in front of children:

[...] hmm...I think I will probably not show my fear in front of children.

[...] Because I feel like...adults should help them, just...bear these kind of things, and it seems like, if even we got scared, they will probably, just don't know what to do. Yap, so I think it should be us...it's just I won't let her know that I am feeling scared, possibly make her think that I am working something out.

Chu's concern about expressing fear to her child is related to undesirable emotional socialisation effects. As children do observation learning, they might pick up some signals from their parents' reaction to various stimuli. Therefore, she talked about how showing fear in front of her child can be risky in this sense:

For example, to the child, fear should be less and less, [I] can't show to be that fearful, because I don't want him to learn, I don't wish that he is afraid of this thing or object, and then does not touch or experience this stuff.

Different concerns may arise when it comes to expressing negative emotions to the elders, mostly due to the need to avoid provoking one's elders into various negative feelings. See the following quotes from Chang and Wang for examples.

Chang: Well... I just thought about it in my mind. If there is any unpleasantness in my life, then I might share it with my friends, but I might not talk to my parents because I don't want to worry her/him, like this, right.

Wang: Not suitable, not appropriate for me to be angry at, like the elders, I will not be so... obvious.

Me: Oh, so [in terms of] people, you think that the elders are not appropriate, and emotions like anger are not suitable.

Wang: Right.

Trustworthiness and emotion expression

Some mothers use trustworthiness as an index of whether they feel comfortable expressing emotions. For example, Kao shared that:

Yes, or someone I feel more trusting, for example a person who is a professional in education, psychology, that is, professionals, then I will share with the person things related to the profession.

5.3.2.3 Assumptions behind the rules

Further analysis indicated that there are various assumptions that mothers make, which guide them to develop the aforementioned rules of expressing certain emotions. These emergent assumptions are presented below.

Emotion is not functional

Some mothers believe that some emotions are not functional. This means that some emotions are useless in dealing with and solving problems. Further, some emotions are not meaningful to others.

For example, Hsieh stated her experience:

Because in some scenarios, when you encounter certain things, let's take surprise for example, when you encounter something and everyone is surprised, when I am also shocked, you need someone to be calm, in order to deal with all the things.

Or, interestingly, in Lin's accounts, she repeatedly used "rubbish" as a metaphorical expression of her emotions and feelings, clarifying that it includes good and bad emotions. This may imply her belief that her own emotions might be useless to her friends. One example of her using this metaphor is the following:

Right, mood rubbish, anyways just a mood, yes, [I] share happiness as well, yes, but just a pile, a pile of what I think is rubbish (laugh), just, it's like friends are like bins, [you] just will..go..right, to...receive some...this and that stuff (laugh).

Emotion is functional

Some mothers believe that expressing certain kinds of emotions is necessary in some situations. That is, emotion expression can be functional in terms of solving problems or in interpersonal relationships.

In some cases, people who do not show anger at all might be deemed as weak. In Chang's opinion, for instance, one cannot express no anger at all at the workplace, as that might lead others to think they can take advantage of you.

In the workplace...sure, because you cannot not express your anger at all, because if [you are] like this, other people will think you are easy to talk to, easy to be taken advantage of, that won't do either, so [you] still need, still need some [expression of emotions], right.

In other cases, expressing emotions can facilitate others' providing help. In other words, expressing emotions can convey a message of seeking the help of others. As Chu said:

[...] However, for example fear, if, for example, [fear for] cockroaches, [you] will just act more afraid, because, daddy will then come to solve [this issue] [...]

Sometimes it is necessary to express emotions properly, because expressing emotions has value in interpersonal relationships. It helps build boundaries between individuals and facilitates understanding. Hsieh shared her thoughts on this:

Because to be frank, people and people getting along, just like us, I don't know you and you don't know me either. You don't know my pet peeve, and I don't know yours. Should [one] step on it, [you] need to timely send out some signals to tell that one [person], this is my pet peeve, don't step on it again.

Emotions have negative impact on others

Most mothers think that expressing emotions to others may have a negative impact on them due to different reasons. Such impact might be eliciting other people's emotions, or even offending or hurting others. More specifically, Taiwanese mothers tend to hide intensive negative emotions, as they may scare others or worry them. In addition, expressing intensive negative emotions may make others angry, and in turn being attacked back and cause more conflicts. The following extracts are presented to show this notion among Taiwanese mothers.

Chang: Hmm...It just passed my mind that, if I have any frustration in life, then I might share with my friends, but I probably won't tell my parents, because I don't want to make her/him worry, like this, right.

When asked about the reason why she tends not to express negative emotions to people involved (litigants), Wang responded as follows.

It's just, first is being afraid to hurt him, right, and second is, it's just being afraid to offend him, afraid that he will be angry. The other thing is probably, even if he knows, he will not change (laugh), right, so why confront him?

Emotion is a sign of weakness

Some mothers are inclined to hide some emotions because they consider certain kinds of emotion expression risky in terms of exposing vulnerability or weakness to others. For instance, in general, Kao thinks that hiding emotions can appear as strength, while revealing true emotions is vulnerability. Also, other mothers provided examples for specific emotion expressions being a sign of weakness or vulnerability in the following extracts.

Chen: And also, sadness, sadness probably...[I] don't let...others to see.

Me: Oh, how so?

Chen: It just feels like...you make yourself seem very weak? (laugh).

Hsieh, conversely, wanted to avoid showing fear in some contexts because she does not want to make people who trigger her fearfulness know that she is actually afraid. As she took this to show her vulnerability, she worried that people might take advantage of that.

Hmm...also [I] think about that, I can't protect him is not key, it's I will also think about if I encounter this and I am afraid, it's probably I met this person and I am afraid, then how will this person think of me? He will think, you are afraid, so did I achieve my objective?

5.3.2.4 Emotion regulation strategies

Notably, in Taiwanese mothers' accounts, the necessity of regulating positive emotions is not found. When asked about their way of dealing with emotions, they mostly focused on their ways of handling unpleasant emotions. It seems that, mostly, it is the negative emotions that need regulation. Therefore, the following focuses on emergent emotion regulation strategies that Taiwanese mothers use to deal with negative emotions.

Personal emotion release

There are mothers who prefer venting their negative emotions alone through words or mere crying. For example, for Hsieh:

Let me write some words, complain and whine, ok! I am then fine.

Emotion release with others

Probably one of the most frequently mentioned strategies of all was talking to others about their negative emotions as a way of regulating them. One mother (Kao) shared her way of regulating emotions through religion. This suggests that Taiwanese mothers have close connections with people around them, no matter whether these are spouses, family or friends.

Wang: Just venting with someone ah! I usually find someone to talk about it, then I will be much better.

Fang stated clearly that when going through a stressful period of time in life, she preferred talking to her close friend who can listen to her sincerely.

Yes, then I had a colleague at that time, he/she was my good friend, this one, this colleague is a really sincere person, that is, if you talk to him/her, he/she looks at you sincerely, and then he/she will listen all the time. So, I was pregnant at that time, then he/she was super nice every day, he/she drove me home every day, then on the way home, I would talk to him/her, about a lot of things that I couldn't get over with, and then he/she would listen. Then he/she was super nice, he/she is better than my sister. [...]

Distraction and relaxation

Commonly found in Taiwanese mothers' accounts was the use of some kind of a distraction strategy to seek relaxation and keep themselves away from the emotions for a while in order to regulate them. For example, Chu, other than complaining with her friends, went out for a bit of shopping, while Lin and Chang thought that sometimes getting a massage helped regulating their emotions too.

In Fang's case for example, she shared that one of the strategies for her to adjust her emotions is making bread. She thinks that making bread is a process of concentration and would lead to distraction from other things in life.

Fang: Just go home and make bread, like this.

Me: Pursue your own interests and resolve your emotions –

Fang: Just let... I will forget a lot of things in the process of concentrating in making bread.

Cognitive re-appraisal and problem solving

Some mothers believe that solving the problem that is causing the negative emotions or trying to look at the problem from a different perspective can help regulate their negative emotions. These strategies involved them actively contemplating how and why their emotions arose.

Chen's example of her using meta-cognition to find a way to relieve herself can be an illustration of this process.

Oh, I think...it seems like I frequently pull away from myself. It's, we used to call it something? Meta, it's just seeing your current self from a different perspective, right, I think it seems like I can pull myself away, and to see the current me, and probably talk with myself (laugh), and then feel, like, how things, should be solved, or should do what, or probably just tell myself [I] can only endure, or what, right.

5.3.2.5 Views about mental illness

An analysis of the mothers' narratives also resulted in salient emergent themes regarding their perceptions of mental illness and emotional difficulty, which consist of evident stigmatisation and various kinds of negative thoughts, but also of some neutral or positive views about mental illness or psychological disorders.

Stigma and negative thoughts about mental illness

Stigma and negative impressions towards mental illness and mentally ill individuals seemed prevalent enough that despite the possible violation of social desirability, some mothers directly stated that they were aware of their own stigmatisation towards mental illness. Madness, insanity and psychopathy were easily associated, sometimes intuitively, with mental illness in our conversation. For instance, the spontaneous reaction of Chen to mental illness was the use of the term "psycho." In another example, when asked about her intuitive thoughts on mental illness, Wang responded:

Hmm... [I] usually will categorise it in...bad side, right, just think that it is...different from you. It's like what people call stigmatisation, labelling, right.

Mental illness has many negative implications in various aspects in Taiwanese mothers' perceptions, which are presented in the following.

Abnormality. Some mothers think that being mentally ill means being different from ordinary people. As a result, it makes it harder for people to reason or empathise with them.

Wang: Right, so...[you] know that it is caused by illness, but when you see [a mentally ill person] you still think, stay away from them, because your living environment and their background of growing up, everyone is different, right, and it makes it hard to empathise with, experience why he is like this, it is quite hard.

Chang: Hmm...outburst is just...weird. [...] and then there is, take medicine and take until being different from normal people, if serious, right.

Seriousness. Mental illness is perceived to be more serious for some mothers or to the general public in the mothers' opinion. Some Taiwanese mothers thought that psychological problems or mental illness are much more serious and harder to treat than ordinary physical illness.

For example, Chang holds quite pessimistic views regarding mental illness. She feels that there is no solution for mental illness, not even through religion or medical help. Chu also shared her thoughts about the differences between mental and physical illness in terms of treatment.

Which, hmm, it's the mental one, because general physical illness is ok in terms of the relapse and stuff, just maybe take some medicine to treat, [it] will get better even without medicine. But psychological and mental ones will...even if he takes medicine or else it can still be worsened, right, [it is] more difficult.

Lin sees mental illness under a more neutral perspective, but she is still aware that people in society tend to consider mental illness as a serious matter.

There should be still more or less people seeing it strangely. If you say you have depression, people will think, it is like some kind of major, it's just very, you have that illness, it's just that kind of feeling. Mentally, as long as it involves the mind, people will think it is like untreatable or something. Right, but I think, I think it's fine, if you are willing to accept treatment, and willing to accept you have this illness, it should be fine.

Damaging interpersonal relationships. In some mothers' opinion, mental illness can have significant negative impact on others and, in turn, damage the establishment or maintenance of interpersonal relationships.

Kao shared her thoughts about how mental illness can affect people around them:

Right, of course this [mental illness] will affect his entire living circle, interpersonal relationships. It is likely that because of this change, the surrounding people will also be impacted in a huge way. Because we all have a, our social construct, for example, family, or workplace, especially family will be affected the most. Family impact is huge, right, so in terms of this mental illness, I think, it is more serious than physical [illness].

As can be seen in Chang's view, it is especially salient that people with mental illness may become bitter burdens for people around them and affect them in different ways. She thinks that mental illness brings helplessness and pain to one's circle. She indicated that, although she was educated to respect people with mental illness, if they affected her work or family, she would be resentful and probably take actions to defend her family. She was under the impression that it is hard for family to get along with people with mental illness. It also implicates difficulty in finding a partner. Moreover, it affects the education of the next generation. This means that Chang considered mental illness as having a negative impact on social and familial bonds, which she thought were important. Similarly in Chen's opinion, people with mental illness would bring pain and psychological burden to people

close to them, and made it difficult to be with them. As she said:

Right, for example [an] individual with depression, he/she might want to...end the life of himself/herself, and then he/she will use different methods, and then he/she might cause harm to his/her own body, or...in this process he/she, the people around him/her need to bear a lot of things like this with him/her, it's actually very hard for people around him/her.

Unpredictability and uncontrollability. Some mothers held negative impressions about mental illness because it is associated with unpredictability and uncontrollability. The behaviours and emotions of mentally ill people are deemed as unstable and, therefore, raise anxiety in others.

As Chen shared that her first thought about mental illness was psychopathy, I further clarified with her what the term “psycho” meant to her:

Me: What does “psycho” represent?

Chen: Hmm, probably he/she is unable to control his/her own behaviours, and might do some...behaviours...that might harm himself/herself or others.

Wang's thoughts about the prognosis of mental illness also illustrated her concern of the unpredictability of mental illness.

And furthermore, because their illness is that kind of, will not, [it is] not cured after taking medicine, they can only be controlled, but [it] can outbreak anytime. Because you don't know his status of medication, so it is very unstable. Hey, so you will wonder if he is fine at this moment, the next second he just...outbreak. This unstable feeling, so [I] will tend to reject this kind of illness.

Bad judgment and decision-making. Kao thinks that being mentally ill can lead to making decisions under the influence of emotions rather than objectively, therefore, lacking good judgement, as shown in our conversation:

Me: Ok. Then what kinds of problems do you think a person with psychological or mental distress would face, or situations?

Kao: (...) Hmm he/she probably might face problems, hmm in terms of the judgement of things, that is ability to judge, might be weaker. He/she might use his emotions to judge, to choose, decide his/her matters, his/her management of a matter, right, and probably often lead to, that...consequences would be much worse, right. If [one has] mental illness [one] would have this situation. Because [one] will, easily make, [I] should easily say [I] should say [it is] easy to make wrong judgements and choices, not objective enough.

Dangerous: causing harm to self and others. Through personal experience, information distributed from mass media or observation, some mothers believe that individuals with mental illness are more likely to bring harm to themselves or to others. Therefore, mental illness is often perceived as associated with danger and causing potential harm to oneself or to others. The following are some extracts illustrating this impression.

Chang shared her mistrust in how the legal system safeguards the mentally ill and the people around them. She thinks that the current system is way too passive in terms of preparing ways to prevent and avoid harm. Attention will only be paid after something serious has happened. She provided an example of how the mentally ill should not be allowed to drive after taking medicine due to the potential haziness caused by the drugs. This underlined her belief about the danger posed by the mentally ill.

Similar thoughts about the potential risks presented by people with mental illness can be found in some other mothers' accounts.

Wang: So, mostly you hear negative [statements], right, compared to those [for] physical illness. Because it may harm, the point is his illness will let you know he may harm you, not like general illness is suffering for himself, but his this [mental] illness will lead others to be hurt. So [I] still think it is negative.

Chang: If serious...[it] can endanger life.

Me: Of others or of himself/herself?

Chang: Himself/herself, right that is, the ones close around him/her, and he/she might, hmm when he/she is hallucinating, he/she might kill his family.

Chen: Because when we first think of mental illness, [we] will think of the damages they bring. That is, for example, no matter [the] hurt caused to self or to others, yes [you] will...think of these things first, right.

Negative influence for the next generation. Some mothers showed concerns for the possible negative impact of mental illness on the next generation through education or genetic inheritance.

For example, Wang mentioned that it is possible for people who do not understand mental illness to pass unwittingly genetic characteristics to the next generation.

Then...[people who] understand less...will become...causing the next generation, that as well, subsequently have mental illness too. This will be inherited.

Also, in sharing the potential problems people with mental illness may have, Chang provided another example of possible negative influence to the next generation.

Hmm...no jobs. And then...family could not live with him, unbearable, right, and it is hard to find the other half, and if [he/she] does have one, then it might affect...the education of the next generation, because he/she cannot control himself.

Similarly, when Fang talked about her recent conflict with a parent of her student, she shared this concern as well. She was seriously harassed by one parent of a student in her class, and she suspected him to be schizophrenic. She spontaneously mentioned concerns for this student, and I asked if she worries that parents with mental illness might influence on their children's education. The following is her response.

Oh, [it] has a great influence. (...) Ah I am very worried, because...as you know that incident with Zheng Jie's, Zheng Jie, [his] family, all normal, [he] has a father and a mother, [even he] can, had reasons to kill people, then I can hardly imagine this child. I think... it's terrifying, right, because his father, it's really obvious, he is different from normal people, and then the child is taught by him and become ... very afraid of people, seeing the crowd, just does not dare to look at people, [his] eyes don't dare looking at people.

Association with crime and deviant behaviours. In some mothers' accounts, an interesting viewpoint regarding the label of mental illness emerged. Sometimes the label of mental illness can be used as a rationalisation of an individual doing something that is abnormal or deviant in the eyes of society. In extreme cases, it can sometimes be related to crime or tragic events. For example, Chu, Chang and Wang brought up in their interviews that sometimes the mental-illness label can be exploited by deviant individuals as an excuse for committing crimes. Seen from another angle, the general public sometimes attributes dreadful crimes to mental illness. Such actions might strengthen the stigmatisation towards mental illness in society. Conversely, Kao

made a connection between mental problems and world wars and the bloody history of conflict present in almost every dynasty transition in ancient China. She attributed these damaging events to human nature. This highlights Kao's belief that mental problems are a staple of humanhood, differing only in degrees of manifestation and impact. Also, they are evidently associated with extremely negative consequences. Here is one extraction from Chu's observation.

[...] Or obviously it is, he is actually a normal person, but he did something bad, then everyone said that he is...psychy or something and then... or he thinks he is psychy so he can do these things, and then be rationalized.

In conclusion, the stigmatisation of mental illness is still prevalent in Taiwanese society, at least according to these Taiwanese mothers' accounts. Nevertheless, it is still worth mentioning that there seemed to be a transition in this phenomenon. Some mothers have shown awareness of their own stigmatisation, while a few, including one clinical psychologist, demonstrated rather neutral or even positive attitudes towards mental illness (see the section above discussing each individual mother, and the subordinate theme presented below). All these suggest that there are different perspectives regarding mental illness among Taiwanese mothers.

Neutral and positive views of mental illness

Alongside the prevalent negative thoughts and impressions related to mental illness found in my interviews with Taiwanese mothers, there are still voices that indicate the existence of neutral or positive views regarding mental illness.

For example, I found a sense of optimism in my conversation with Lin. She explicitly stated that she thinks mental illness is not an incurable disease. It is more and more common nowadays, and people need to face it. It can be dealt with medication or psychotherapy. Lin holds a relatively

optimistic view about mental illness, and she seems keen to adopt actively strategies to face it. According to Lin's observations, people in general do not understand mental illness. Neither the general public nor the patients are equipped with awareness regarding mental illness. People who are not familiar with mental illness hold negative impressions of it, namely that people with mental illness tend to lose control of their emotions and, in turn, hurt others. Also, people are not familiar with treatments for mental illness, including its effectiveness and the prognosis after treatment.

Also [people] don't know its actual treatment, and the extent of effectiveness [of it]. For example, this person has depression, and he is what mild depression or what, he might be taking medicine for a while, or psychological construction, that is psychotherapy [for] a while, that kind of thing, and then [is it] ok or not, [is he/she] better? And will it relapse or what, frankly people don't really know. Also for its treatment, [people] do not actually understand. Right.

Chu holds some neutral and some rare positive views of mental illness. She thinks that people with mental illness are not that different from ordinary people. They are just sick and need treatment and care. Under the influence of their illness, they might have some self-caring problems, trouble expressing themselves or hallucinating. Some might display behaviours that seem terrifying but it is not intentional, and they do not necessarily hurt others. Chu also talked about how sometimes people with mental illness have adorable behaviours. In her opinion, people should not attack or criticise individuals with mental illness.

Hmm...and, some mentally ill patients actually they are kind of adorable. They actually won't hurt people, and [they] have some...just cute actions, right, in fact I study nursing, we interned before.

Differentiation between different types of mental illness

I found that some mothers I interviewed have separate conceptions of psychological and psychiatric illnesses/disorders. In Hsieh's opinion, psychological and psychiatric illnesses or disorders have different meanings. Chang also demonstrated this differentiation, as she expressed her view that psychiatric disorders are more serious than psychological disorders.

Wu provided a more complete understanding of this differentiation. Wu thinks there is a difference between psychological and psychiatric disorders. She also shared her observation that in more traditional regions, namely the south part of Taiwan, there seems to be confusion between the two. Below is a comprehensive extract of her thoughts and observation:

[...] In fact, in our beliefs, like our, the beliefs here, based on the beliefs here in the south, they put psychological disorder and psychiatric disorder together, actually this is separated. And, so called...stress-caused [illness], in fact you need to see a psychology doctor, instead of psychiatric disorder, so at the beginning of these problems [you] will see, you don't want to go to a psychiatrist, however, our clinics and hospitals place the psychiatry department and psychology department together. So you go to a psychology doctor and people think, well are you psycho? (in Taiwanese) Because he/she will think you do have a psychiatric disorder, so usually to people in our time, people who go to psychology doctors usually are not willing to let others know. Because others, will think you have a psychiatric disorder. But these are really different things, it is just that possibly doctors, in treatment and medical actions aspects, they are similar, but one is giving medicine and one is not giving medicine, but people won't see it like this.

In another extract, Wu talked about her observations of how people around her see mental illness. Interestingly, here, Wu demonstrated her beliefs that people with more traditional values, such as her family-in-law, would be more likely to confuse different kinds of mental illness and, in turn, generally stigmatise all kinds of psychological distress.

Right, right. And they (her family–in-law) will put...psychological disorders with, just what we called depression, and...bipolar disorder, anxiety disorder these, are like, psychological, and, [say] you have depression, so you have lunacy (in Taiwanese) [...]

These expressions conveyed several key messages here. First of all, there are different levels of stigmatisation towards different types of mental illness in current society. Second, seeking professional psychological help (psychotherapy and counselling) is associated and easily confused with the psychiatry profession, due to the mental health system in operation or possibly the lack of psycho-education. Other than what Wu was overtly sharing, the fact that the term “psychology doctor” is used repeatedly in most mothers’ accounts is an indication of this confusion. Given that here I discuss Taiwanese mothers’ subjective experiences and interpretations, I will keep this expression wherever necessary. Lastly, the fear of being labelled mentally ill and stigmatised is present and associated with people’s willingness to be open about receiving professional psychological help according to Wu’s observations. Substantially similar views have been identified in other mothers’ interviews as well, and will be discussed further in later sections.

5.3.2.6 Associations between these themes

Understanding how Taiwanese mothers perceive the relationship between these themes is as important as it can inform the rationale underlying the mechanisms found in Phase one. In other words, how does being in a Chinese cultural context shape Taiwanese mothers’ attitudes towards seeking professional psychological help through their views about emotion expressivity, regulation and stigma towards mental illness.

Cultural values and views about mental illness

Devaluing the label of abnormality. As previously mentioned, being mentally ill may imply being labelled as abnormal. It is sometimes more difficult for Taiwanese society to accept and embrace things that deviate from normality. For example, Lin thinks that in Chinese societies, people see mental illness as strange. She observed that Chinese societies are more traditional and repressive. Even though people feel modernised, traditional values still have an impact in stigmatising mental illness. Although there might be generational differences, the negative attitude towards mental illness persists. Compared to the more liberal attitudes in Western societies, it is harder for people with Chinese cultural values to accept having psychological problems. People are afraid of being judged and gossiped about by others, therefore, hiding their own issues and not daring to face them. Or as Wang's observation suggested, (culturally) Chinese people do not like "difference." Being out of control, which is another negative impression associated with mental illness, is an example of deviation from normality and this cannot easily be accepted in this culture.

(...) hmm...probably would be, because our society is less accepting of this kind of people. So...he/she might obtain fewer opportunities. The opportunities people willing to give him/her would be less. Yes, some people he probably, controlling well, but, let...(his/her) superior know he/she has this kind of disorder, he/she will not be willing to let him/her continue this job, right, I think this is our culture will be like this.

I think our culture does not like different. Just our culture prefers people follow step by step, by standard, you have one person who is not on the step, [he/she] would be more easily, be excluded.

Domestic shame should not be made public. Mental illness is easily associated with shame in Taiwanese society. The Chinese dictum “家醜不能外揚 jiā chǒu bù néng wài yáng” (domestic shame should not be made public) may play a significant role in viewing and treating mental illness in a society imbued with Chinese cultural values. Chu shared that an individual in a Chinese cultural context would hold that family shame should stay within the family and not be made public. Therefore, common attitudes towards mentally ill family members include keeping them at home, hospitalised or institutionalised. Chen thinks that this way of treating people with mental illness may cost individuals with mental illness more timely care, or even lead to mistreatment in some cases. In her view, Western culture is more accepting of children with mental illness, and provides them with treatment and special education. Therefore, these children lead better quality lives in the West.

[...] I think it might be [culturally] Chinese people are surely more...that kind of thinking of “domestic shame should not be made public.” So, for example someone in the family has similar situation (mentally ill), they probably will...[people] in the family probably would have him/her...hidden, and probably even miss their timing for treatment. And then it is likely that...I have seen similar example [of] just mentally ill [child] in family, and then urgh...urgh parents need to go to work, so he/she can only be chained the child with dog chain, he/she worries he/she just...running around everywhere, and then cause some trouble, so he/she might, just nothing but to have him/her, so us [culturally] Chinese people probably is this kind of thinking, so would miss some timings for them to get treatments, and relatively speaking...[in my] impression feels like Western culture, they as to this kind of children...would be more accepting than us, then probably would provide children some ways of treatment, probably even willing to let them go to...receive special education, and then let their lives to be...better, easier this way.

Filial piety and risk of blame and guilt. In the Chinese cultural context, the label of being mentally ill is feared and avoided not only due to its potential negative impact on oneself, but also on

one's family and especially one's parents. This may be due to the close family relationships and the emphasis on family responsibility in Chinese culture. Closely related to this value is the virtue of filial piety, as it implies children are not to cause any unpleasant feelings to their parents or elderly relatives.

One of Wu's worries, for example, is to let her family of orientation know her thoughts about seeking professional psychological help. This is also due to the potential association between seeking professional psychological help with being mentally ill. She worries that due to their family history of mental illness, her parents might think that her having mental problems is related to their genetic inheritance. I think that what this means is that Wu is worried that her situation will affect her parents by either worrying them or having them feel guilty for potentially causing her discomfort. In other words, she wants to avoid invoking any negative emotions to her parents. This shows her striving to uphold the filial piety code in the Chinese cultural context. In the following extract, we were discussing why she did not seek professional psychological help in the past.

Right, there is this side, because, if [I] let my husband's side know, he/she will constantly, think you have mental issues. Ah, if [I] let my own parents' side know, he/she will, instead he/she will worry for you. Because I, personally inside our family there is, [one] sister is mentally ill, and then because people say mental illness is inheritable, and then, if [I] tell them, they would feel is it because of the family, and then result in you having this kind of symptoms appearing, right, ah, in fact, this belief is not right, right, so, [I] would choose to, then, try to let myself get out of [the situation]. [...]

Similar to Wu's concerns, Chen's observations on parents' reaction to children having mental problems represent the other side of this association. As a primary school teacher, Chen offered her thoughts on why some parents might not be willing to let their children be labelled as mentally ill and, potentially, miss the chance of early intervention. First, parents want to avoid being blamed for their children's illness, both genetically and developmentally. Second, parents might blame themselves and feel guilty for their children's illness. Last but not least, parents want to protect their children from

suffering the judgements of others by not making their children's problem public.

Chinese cultural values and emotion expressivity

It is interesting that Taiwanese mothers are aware of how their cultural background is closely connected to their view on emotions. All mothers except for one (Hsieh) have indicated that their emotion expressivity is influenced by cultural values. Emergent themes regarding the subjective view of the relationship between Chinese cultural values and emotion expressivity, as well as some personal experiences of the Taiwanese mothers are presented below.

Suppression. Some mothers think that emotion expression in the Chinese cultural context is evidently more suppressed.

Lin offered her observation of the difference between the Chinese and Western worlds in terms of the expression of emotions.

I think it should be. More or less, in the [culturally] Chinese world, I think, [I] should put it like this, we, like [culturally] Chinese people, in terms of emotions [we] probably are not as direct as Westerners, right, [we] tend to be more suppressive. Right, I feel it should be [like this].

Similarly, Chang thinks that emotion expression in a Chinese cultural context is more conservative. She, as a teacher, was educated to be obedient and not to defy. This may indicate that she was influenced to respect cultural values and follow more conservative emotion expression rules in society.

There is, more preservative. [We] are more afraid of speaking up our mind. Just like what I shared with you before, didn't I tell you that I withdrew from expressing emotions in the workplace? Right, we Chinese people are just like this.

Chen also feels that her emotion expression style, such as her preference not to cry in front of others, is influenced by cultural values, as she was taught as a child to be more suppressive and reserved since little.

I think yes, it's just that we are taught to be more suppressive since little.

According to Chu, people in the Chinese cultural context are more suppressed. Calmness is valued while intense emotions, positive or negative ones, are discouraged. She thinks that she is slightly affected by such values, and hopes that her child does not inherit this influence and that they can display emotions in moderation. In the following extract, Chu responded to the question whether her habits of expressing and dealing with emotions were related to functioning within a Chinese cultural context.

Hmm...yes, it is just more closed. [It] Will be more, just it seems like more...be, be more calm, just educated to be, don't you be like super happy, and don't be too high, and then...right, and then not to be too...anyways probably just not too intense.

Me: Oh, so [you] think our culture tells us to be calmer?

Chu: Yes, and there is, like sadness, just probably, [our culture] would just hope you do not cry or something.

Me: Oh, so you have this kind of feeling?

Chu: Yes.

Me: Just our culture makes us feel –

Chu: Just more suppressive.

Similarly, Fang doesn't agree with people who express their emotions very intensively. This demonstrates that intense negative emotions expression is sometimes disapproved. She thinks it is

better to be more reserved. Emotion expression that is too direct will let others to be afraid, and will not be genuinely respected.

M: So when I see people who are very intensively emotional, and they are like so blunt in front of their colleagues. Actually, I am not quite ok to accept it. I feel that [one] should reserve, should give, for, for others to probe? I will think [one] should reserve, right, reserve a little.

Traditional virtues and expressing emotions. Chinese culture has sets of virtues to guide expectations in society to achieve certain standards. These standards have implications on how emotions should be appropriately expressed.

For example, the virtue of filial piety and its related beliefs lead people who adhere to Chinese culture to value being respectful of their elders. As Chinese culture values proper relationship rules between an individual and the elderly, it is deemed inappropriate for one to provoke the elderly no matter the reason. As Wang stated:

Yes, like to elderly, especially...between mother-in-law and daughter-in-law. This part is deeply influenced, because [I] feel, [being] married to their family means to be good, and don't misbehave, don't, don't irritate them, that kind of things.

Fang shared her experience of being taught to be obedient, and therefore she dared not to directly express emotions. It can be seen in her words that the expression of negative emotions may be considered as a violation of the image of an obedient and well-behaved child. Direct expression of negative emotions neither decent nor filial as it carries meaning of disobedience to the elders.

Fang: Right, [I] completely wouldn't, [I] did not dare to, [I] just swallowed [it], but I would be very depressed by myself in the room, right, but I did not dare to express it. Because my

mother would think that you just need to, to obey, and then to well-behave like this, because my mother is very strong.

Me: So [you] would feel that, to express... that, negative feelings are equal to more disobedient –

Fang: disobey and rebel, right. [I] would feel as if I am disobeying my elders.

Me: Oh, because, this emotion will, expressing it will let them?

Fang: Just not decent.

Being in control of your emotions is a virtue and failing to do so is shameful. As Chen was taught since childhood, showing emotions that are out of control and especially in the presence of others is shameful or sometimes even punishable. Chen deemed that her style of emotion expression was influenced by cultural values. She was educated to be more suppressive and reserved as a child. For example, she does not like crying in front of others, and she attributes this to her childhood experience when her parents prohibited her from crying outside the home, as it draws attention and is shameful. Also, children get punished for being angry or throwing temper tantrums.

I think yes? It's just we are taught to be more suppressive since little. For example like, for example I don't like to cry in front of others, it is probably you know, dad and mom, for instance you cry when you are young, outside [of home], dad and mom will feel ashamed, he/she will tell you [you are] not allowed to cry, just no matter any reason, he/she] will tell you [you] are not allowed to cry, anyways you are not allowed to cry now, right, he/she will think, at that time our feeling is that he/she thinks that it is shameful that I am crying, so it makes them think that everyone is looking at us, so he/she will...so I will think, probably think that don't express in front of others. Or for example if children are being tricky or something, and...in our past education it might be...you will directly get, just get hit, get something. So these emotions are relatively more repressed, right.

Another example, in Kao's opinion, would be that expressing emotions needs to be in alignment with “禮 Lǐ” (etiquette or courtesy in the Chinese cultural context) or certain manners in our society. Kao hopes to express her own emotions as genuinely as possible. She thinks, however, that there are some disadvantages for individuals who cannot express their emotions according to the context or even disguise them a bit.

Yes, but this [expressing genuine emotions] might be at a disadvantage, some people might think, this society strongly needs [you] to do...language and emotions expression...according to the occasions. Some people might consider this important, that is a kind of etiquette, some people might feel this way.

Emphasis on maintaining relationships. In the interviews, the characteristics of a collectivistic culture can be discerned in the value attributed to harmonious relationships and their association with emotions expression. This value extensively influences Taiwanese mothers' emotion expression and habits of suppressing it in their social, work and family contexts.

Chen considers herself incapable of hiding her thoughts, which means that she expresses whatever she feels. Similar to all other mothers in the interviews, however, Chen's accounts also demonstrated her consideration of following the rules of emotion expression as presented in previous sections. Expressing emotions is functional sometimes, but also risky in some scenarios when it violates certain cultural standards, for example damaging relationships. Hiding and withholding some emotions can, therefore, safeguard against the possibility of forming enemies within the workplace.

On the other hand to colleagues, [I] will think, we are working in the same place after all, it seems not suitable to be enemies or something, therefore some times some emotions [I] will be...more...slightly more withholding, right.

Conversely, Wang avoids direct emotion expression in relationships that she considers more vulnerable, as she worries that they may be damaged. This also suggests that the directness of emotion expression is associated with the robustness of the relationship.

Hmm...because I think parents-in-law are still different from parents. Because how you disobey your parents, how [you] irritate them, they still consider you their children, so you, speak with him/her with anything, he/she...can accept, but I, I myself think, I am not saying that my father and mother-in-law are like this, I think, parents-in-law might think, if you think like that then forget about it, just let you, do however you want in the future, don't need to help you, blah blah blah, just live your own life something like that, it is easier. Right, so [I] won't express so directly, my feelings.

Fang thinks that she rather be a calm and peaceful person and avoid incurring enemy for expressing emotions too intensively. This also suggests the concern of the negative effects on relationship with others due to intensive emotion expression.

M: Yes, it seems, right, we ourselves feel that it seems weird, but it is, but I still choose to be a calm person, calm, right. Just don't go incurring enemies with others.

Yu similarly avoid expressing intense negative emotions due to her concern that such emotions imply aggression and may damage interpersonal relationship.

Right, because like rage and anger, [they] are actually more aggressive emotions, but like, sadness is also negative emotion, but I may express sadness, because sadness I think, it is an emotion with relatively less aggression. So I seem to be, I think I might be, very worried about damaging the relationship.

Views about dealing with and expressing emotions, and attitudes towards seeking professional psychological help

There is an association between professional psychological help and expressing and exploring emotions. For example, Wang recognises that sometimes consulting with the school psychologist is merely a way of venting emotions. Also, Lin's transition regarding expressing emotions and her attitude towards professional psychological help provides possible explanation between the associations between the two. In sharing her own experience, Lin's accounts provide clues to the connection between emotion expressivity and attitudes towards professional psychological help. Lin used to be shy, kept a lot of things to herself, and suppressed her emotions more. In time, she came to believe that expressing is better than suppressing, and was more willing to express her emotions. This transition made her think that one does not need to be mentally ill to seek help from psychological professionals. She became more accepting of professional psychological help partly resulting from her feeling more comfortable in expressing emotions.

[...] Then I think this is, helping, helping your...some personality, will be more, how to put it, after being more brave to interact with people, you probably will, your emotions, it is easier to let yourself express it, yes, more able to express your emotions, right. Less likely to like encounter something and just, ok, you just being angry there silently or whatever, right, [I] think this is much better. And then if you dare express emotions, slowly you will think, many things you think, for example probably before [you] think people see psychology doctors are a kind of, like having some illness so that [you] go to psychology doctors. Now gradually [you would] think actually it does not have to be [like that], just if you really have emotional distress, distressing you for a long time, why don't you seek some opinions from some professionals? Allow you, [be] able to solve [it] fast, and then let your life, right, more, just, [your] life recover to the time [when it] generally has no problems quickly. If [this] can solve your problem. Right, just [I] have this change, like this.

According to Fang's observation, she made a connection of cultural values to the views about valuing emotions, and in turn, contribute to whether to value professional psychological help by comparing Taiwanese and individualistic contexts. This demonstrates not only the association between views about emotions and attitudes towards seeking professional psychological help but also how cultural values may be an antecedent to this association.

You see, foreign countries like Australia, they value leisure, isn't the leisure process a way to start a dialogue with yourself. Yeah, they are individualistic, individualism, and then, so it is, I think they will value more about the area of psychological counselling. I, I think this might be the reason. Then the Taiwanese are, stuck in, a lot of burdens, and family, you have to restrain, you can't be too, value too much of emotions, like my mother never cares about her own emotions. Oh, can't say that my mom doesn't care about her emotions. [I] should say that my mom never dared to enjoy.

Conversely, professional psychological help is sometimes associated with its ability to facilitate emotion regulation through cognitive reappraisal, namely help an individual perceive of an emotionally stimulating situation differently by facilitating reinterpretation and bringing new meaning. The following extracted conversation between Kao and I provides an example of how professional psychological help can be helpful and effective through facilitating cognitive reappraisal.

Me: So in your imagination, what can psychotherapy or counselling bring to you? I mean –

Kao: Hmm I have never tried [psychotherapy or counselling], but my expectation for it, is still there right. I think still, it should still have some effect. But some people told me it is not helpful (laugh).

Me: So what is the effect you expect?

Kao: I think at least it can use a more objective way, because it [psychotherapy or counselling] is not people you know around you, he can probably be objective to, to give me some

hmm...suggestions. Right, possibly [it] can let us jump out of this context, right, probably compared to my relatives and friends' that kind of subjectivity, hmm, would be more positive?

Views about mental illness and attitudes towards professional psychological help

First of all, the stigmatisation of psychiatric disorders is prevalent in Taiwanese mothers' accounts. This stigma was frequently associated with the use of psychotherapy or counselling. Several Taiwanese mothers shared concerns or observed concerns in society of others labelling the mentally ill and, in turn, being stigmatised if one sought professional psychological help. When asked open questions designed to elicit answers regarding the two constructs, mothers tended to intertwine their answers regarding these two topics constantly. I think this can illustrate how much and how deeply these two constructs are related to one another. It seems difficult for Taiwanese mothers to talk about one without mentioning the other. Furthermore, some mothers' accounts explicitly associate the two.

In the below extract of my conversation with Fang, she clearly associated seeking professional psychological help with having depression or situation that is very serious.

Me: Ok. Then, what do you think if there is a person, when you hear that there is someone who seeks counselling or psychotherapy, what do you think this means?

Fang: (...) Means he may, not be quite able to adapt to the crowd, and not quite able to adapt to society, so he/she... need to accept, this kind of service.

Me: Hmm hmm.

Fang: Say, adults, there may be depression or something, the obvious kind, that kind of situation? Right, for example, [that person] would self-harm, or it is, really..., really, if [you ask] me, my opinion is still [it needs to be] very serious, that is, I think it would be, be, be, has already affected his/her daily life.

For another example, when Chu shared her observation of the generational differences in attitudes towards professional psychological help in Chinese societies, she mentioned both the stigmatisation towards mental illness and its association with seeking professional psychological help.

People in the past think an individual who seeks professional psychological help is insane.

Also, when sharing her views on whether to seek professional psychological help, Chang appeared to connect professional psychological help with a stigmatised view of mental illness intuitively.

Right, moreover, I probably, can be sure that I will not go crazy. If I cannot deal with it myself then I might seek that kind of help, so I think I should be fine, thus haven't considered that direction, hmm.

In my conversation with Wu regarding her decision to not seek professional psychological help in the past, while she referred to the differentiation between psychological and psychiatric disorders (please refer to p.177), her accounts also demonstrated the association between seeking professional psychological help and being mentally ill.

Me: Oh, so the primary reason of you considering [professional psychological help] is, probably [you are] worried that family may know you have this kind of –

Wu: Right, [I] have this kind of, because, if [you] let [my] husband's side [of family] know, they will always, think you have psychiatric disorders. And if [I] let my parents' side know, they will, instead they will worry for you.

The following conversation with Kao demonstrated her observation of a number of people's negative views of being labelled mentally ill and its association with seeking psychotherapy or

counselling in Taiwan today.

Me: Ok, understood. Then, what do you think if someone seeks psychotherapy or counselling, what do you think that represents?

Kao: Represent what? I think he/she, he/she he/she is willing to...open himself/herself, his/her his/her his/her...weak part, and to seek help, [I] think [it is] very good.

Me: Ok, so seeking therapy or counselling these kinds of services represent this person might have some...weak parts –

Kao: And he/she is willing to admit, admit oneself. Actually a large proportion of people are, likely is he, actually his/her [condition] is very serious, but [he/she] is stubborn, he/she is not willing to...be honest with himself/herself...in the psychological part he/she is in need of therapy, need to, to to seek someone's assistance. This is the more horrific part.

Me: Oh, then what sorts of reasons you think are possible that this person is being stubborn or not willing to be honest about this part?

Kao: Self-esteem. Hmm, social values, afraid of being labelled, right.

In short, there is a tendency to think that mental illness should be hidden because of the negative views associated with it in Taiwanese society. The behaviour or even explicit inclination of seeking professional psychological help can pose a risk of being publicly labelled as mentally ill, which explains the reluctance to seek such help openly.

5.3.2.7 Other concerns or obstacles towards seeking professional psychological help

With only two mothers (Lin and Yu) showing absolute willingness to seek professional psychological help if needed, most often Taiwanese mothers appeared open to trying professional psychological help, acknowledging the potential positive values that it might bring, while still being hesitant or in doubt of such services, each for their own reasons. In addition to the above presented

concerns that are more corresponding to the proposed conceptual framework of the current project, other emergent concerns and obstacles that can possibly influence Taiwanese mothers' views on seeking professional psychological help and are discussed in what follows.

Lack of accessibility of professional psychological help

Another obstacle identified in Taiwanese mothers' accounts is the low accessibility of professional psychological help. As brought up by several mothers, it is generally not straightforward to think of professional help due to its lack of accessibility. This is sometimes the primary reason for giving up seeking such help because one simply does not know where to find it. Chang shared that she did not even think of the option to seek professional psychological help in the first place when she experienced emotional disturbance in the past. Further, in Kao's accounts, even though she had friends working as psychologists, she said that she did not know where to seek such services, and she asked if she could do so in a hospital. In Wang's opinion, more educated people are more likely to fit the profile of those seeking professional psychological help.

Imagine...[this person] should be a...hmm...intellectual [person]. I think people knowing [professional psychological help] are not, [are] few, people knowing this (psychological help) are not many. So, [people who] seek [such services] should be, with some intellectual background, so that [they] will seek this kind of help. Moreover, or it's his family has lots of sense, yes, others...

[...]

Should be...don't even know there is this kind of information? Don't even know there is this kind of resource to get help. I think.

Chu, also, shared her genuine confusion of where to find professional psychological help in the following extract.

Psychotherapy and counselling, intuitively just very expensive. And then I don't really know where to find it, I actually don't know, because because if it is clinic...because in clinics they are actually doctors...and I don't know where to find the so-called psychotherapists or counsellors, I just have past school experience of a counselling centre, but, but I really don't know where to find [professional psychological help] outside.

Conversely, Fang explicitly question the accessibility of professional psychological help as a kind of resource.

Yes, it is also hard to find a psychologist ah. It seems such resources are fewer in Taiwan, where is the psychologist?

Confusion between other medical care and professional psychological help

Combined with the aforementioned lack of accessibility of professional psychological help, this can incur further obstacles for individuals in receiving professional psychological help. As the concept of psychotherapy and counselling is closely connected to treatment and therapy, very frequently, mothers confuse professional psychological help with medical care. As medical care, however, is often provided by doctors or physicians, professional psychological help, namely various kinds of psychotherapy and counselling, are offered by psychotherapists and psychologists. The term “psychology doctor” is widely used by Taiwanese mothers when talking about professional psychological help, which demonstrates the large extent of confusion between these two different disciplines in Taiwanese society. The following extracts show how often Taiwanese mothers use this term interchangeably to talk about their thoughts regarding professional psychological help.

Chen: Think about...lying on a chair (laugh) and the doctor will ask you (laugh), just, like psychology doctors in a movie, and [the doctor] will ask you “how do you feel?” and then just like that.

Chang: I never think of I will, because I think psychology doctors offer not enough, trustworthiness to people.

Lin: Yes, pay, pay then you can, right, [you] can find a releasing method, I think [you] don't necessarily need to be sick to seek psychology doctors, it's just he/she can...for example if you have any unresolved issue in your mind, or you don't know who to talk to, psychology doctor is a fine option, right.

In addition to these examples, Wu's opinions presented earlier in the section regarding the differentiation between mental illness also touch upon this confusion. Due to this confusion, it is very likely that many people who want to seek professional psychological help in turn seek help from a psychiatry department, since medical help from hospitals or clinics is evidently more accessible than professional psychological help in Taiwan today. Although there is a referral system between medical care and professional psychological help, if coordination between disciplines is not functioning well enough, like in the example mentioned by Yu in her section, it is very likely that individuals will encounter obstacle in ultimately accessing professional psychological help.

Problematic coordination with other professionals

Chu shared that she once had some emotional disturbance that was beyond her control and, therefore, she thought of reaching out to mental health services and, at the time, she consulted with a psychiatrist. She mentioned that her psychiatrist told her that only when people show signs of hurting themselves or others will they be referred to a psychologist. Thus, she was not referred to professional psychological help due to the limited coordination between departments. This is clearly telling of the

lack of communication between professionals.

The possibility of problematic coordination between professional psychological help and other professions also emerged in my interview with Yu, when we were talking about her work stress that may cause her emotional distress.

For example? For example...because I think it may be a comparison, like I talk to some people from Canada or the United States, then I will find that in fact, in the case of a [clinical] psychologist, the development is actually relatively quite good in these places. However, in Taiwan, I feel that I have always been trapped. Why say being trapped, for example... Well... You are in the hospital, cooperating with others, then, maybe, other professionals would feel that you are just a person doing assessment? Something like this. Or, or, because under the system, it is, under the system, some resources may require your, that is need you to sign, then, but you may professionally think that, someone might not yet reach that degree [of illness], but others think that I see him/her has,, so he/her will go and argue your professionalism, [he/her] would think that there might be problems with your judgment, I will feel that, um, I am, in here I am, being in the whole field of work, I seldom encounter, other professionals [who] is cooperating with you. Instead, [I] encountered more often other professionals who question your professionalism.

These examples suggest that there is sometime potential miscommunication and misunderstanding even between mental health professionals in Taiwan.

Duration of distress and seeking professional psychological help

In several cases, mothers had shared that they had thought about seeking professional psychological help, but did not in the end. This is largely due to the fact that they thought they got better or that their distress might be temporary. Therefore, this is a theme showing that the evaluation and estimation of how long the distress might last are additional indications of whether to seek

professional psychological help. Distress should last for a considerable period of time or be expected not to be resolved in the short-term in order for an individual to be motivated adequately and seek professional psychological help.

Below is an extract from Chen's interview, discussing her thoughts of seeking professional psychological help for her suspected post-natal depression, as an example of this theme.

It (professional psychological help) actually flashed through my mind at that time, but [I] was too busy at that time, you know, feed the child and blah blah blah, just these stuffs, so at that time [it] actually flashed by but...[you] would think, it is probably not serious enough to need to, it just at that time [you] think to yourself, ah, it might be due to hormones, and it is possible that when this time passes, [it] should be better, right, so [I] didn't [seek professional psychological help] later.

Cost of seeking professional psychological help

In the interviews, practical aspects of seeking professional psychological help also emerged multiple times. The relatively high cost of receiving such help is deemed as an obstacle, especially when the benefits are doubted. The following extracts give a clear illustration of some mothers' concern regarding the costs involved.

Chang: Because...first of all the most important one is money, because these people with [psychological] problems are actually, hmm, most of them are less economically capable, so they can't see this kind of help.

Chen: Because that kind of therapy sessions are pretty expensive, or one session of them is actually, they might think that, [I] spend so much money, and then...[I] might not get what I want, just not a very...obvious progress or something, [he/she] will think spending this money is not worth it.

**Chapter 6. Integrative understanding of
Taiwanese mothers' attitudes towards
seeking professional psychological help
in the Chinese cultural context**

The following chapter presents the overall findings of the current project through an integrative perspective. The key findings of the thesis were derived from the analysis of the data and results from both phases. Together, the evidence from both phases contributes to the development of a holistic understanding of Taiwanese mothers' attitudes towards professional psychological help in the Chinese cultural context.

The mixed-methods design in the current study brought forward several interesting findings through analysing the general trends among Taiwanese mothers and exploring their individual differences in depth. First of all, being immersed in the Chinese cultural context does make a difference in how Taiwanese mothers see professional psychological help. The relationship between traditional Chinese cultural values and attitudes towards professional psychological help among Taiwanese mothers, however, is mediated by emotion regulation strategies and the stigmatisation towards mental illness. That is, the effect of Chinese cultural values on attitudes towards professional psychological help is not simple and direct. Second, the potential reasons why Taiwanese mothers might hold certain attitudes towards professional psychological help are unveiled. Third, the present integrative perspective allows the discovery of possible explanations for the non-significant statistic in Phase one. That is, the complexity of emotion expression rules, as has emerged from the interviews, provides a possible explanation of why emotion expressivity is found not to be able to describe successfully the relationship between Chinese cultural values and Taiwanese attitudes towards professional psychological help in Phase one. Also, additional factors that might be associated with attitudes towards seeking professional psychological help emerged during Phase two. Finally, it was observed that the attitudes towards professional psychological help among Taiwanese mothers may be undergoing a phase of transition, alongside the extent of adherence to traditional Chinese cultural values. These findings are elaborated in more detail in this chapter.

6.1 Chinese traditional cultural values and attitudes towards professional psychological help among Taiwanese mothers

From data collected from self-report online questionnaires in Phase one and from interviews in Phase two, it has become evident that living in a Chinese cultural context has an impact on the attitudes of Taiwanese mothers towards professional psychological help. Evidence from both phases is presented here to demonstrate that Taiwanese mothers' attitudes towards psychotherapy and counselling are related to their extent of adherence to Chinese traditional values in general, but also moderated according to their particular subjective experiences. This relationship can also be supported by some Taiwanese mothers recognising that Chinese cultural values are relevant to how people view professional psychological help, through observing people around them and society in general.

6.1.1 The importance of Chinese cultural background

As presented in the Results section of Phase one, the correlation analysis and regression model from Phase one provide supporting evidence that there is a general trend of Chinese cultural values contributing to the formation and shaping of attitudes towards seeking professional psychological help among Taiwanese mothers. The bivariate Pearson's correlation coefficient between "Chinese traditional cultural values" and "attitudes towards professional psychological help" is $-.27$, with a p value $\leq .01$. Also, as shown in Table 4.6 on page 102, the regression model suggested that "Chinese traditional cultural values" can significantly predict "attitudes towards seeking professional psychological help" negatively ($\beta = -.17, p < .001$, total effect). Both statistical findings indicated that the more deeply entrenched Chinese traditional cultural values Taiwanese mothers hold, the more negative attitudes they have towards seeking professional psychological help. This means that from a general trend perspective, adherence to Chinese cultural values does influence attitudes towards seeking professional psychological help among Taiwanese mothers of the current generation.

Similarly, although it was relatively rare that Taiwanese mothers talked about any specific Chinese traditional cultural values explicitly in the interviews, quite often in conversation with them,

I found that to several Taiwanese mothers functioning within a Chinese cultural context did influence views of using professional psychological help. Extracts presented in Phase two Result section can be referred to (for example, see section 5.3.2.1 Chinese cultural context and attitudes towards seeking professional psychological help p.153 for more details), to see how some Taiwanese mothers think of professional psychological help in relation to the Chinese cultural context.

6.1.2 Indirect impact of Chinese cultural values

Having discussed the significant effect of the Chinese cultural background on Taiwanese mothers' attitude towards seeking professional psychological help, it is imperative to point out in this section that the findings in the current study also suggested that it is not the nationality or cultural background itself that determines the how seeking professional psychological help is viewed among Taiwanese mothers. Instead, as shown in the proposed conceptual framework (Figure 2.2, p.41 or Figure 4.3, p.75), the impact of one's cultural inheritance on their attitudes towards seeking professional psychological help is filtered through other mediating factors, including emotion regulation strategies and stigmatisation towards mental illness. The mediation model established in Phase one is referred back to as supporting evidence. As when all proposed mediators entered the model along with the "Chinese traditional cultural values" and control variables, the direct effect of the independent variable (Chinese traditional cultural values) on the dependent variable (attitudes towards professional psychological help) became non-significant ($\beta = -.07$, n.s., direct effect). In addition, the indirect effects of stigma towards mental illness, reappraisal and suppression emotion regulation strategy are significant (please refer to section 4.2.4.3 to 4.2.4.5 for more detailed statistics, p.98 – p.102). This provides evidence that the cultural background, or the extent of adherence to cultural values, does not directly result in negative attitudes towards professional psychological help. Instead, the relationship between Taiwanese mothers' adherence to Chinese traditional values and their attitudes towards professional psychological help is mediated by emotion regulation strategies and stigmatisation towards mental illness, as found in Phase one when examining the proposed mechanism. In other words, Chinese traditional values impact Taiwanese mothers' attitudes towards professional

psychological help through influencing how they deal with emotions and how they view the mentally ill, according to the data in Phase one.

6.2 Reasons behind the unwillingness to seek professional psychological help among Taiwanese mothers

Through interviewing ten purposively selected Taiwanese mothers, the proposed mechanism underlying the development of their attitudes towards professional psychological help was corroborated, elaborated and expanded. Analysis of the interviews supported the established mediation model by shedding light on the reasons underlying the significant predictors and attitudes towards seeking professional psychological help. Also, the interviews expanded my understanding of Taiwanese mothers' attitudes towards professional psychological help by inspiring new insights on other important factors that may contribute to their view of professional psychological help. Integrating the findings of the two phases provides a clearer picture of how adhering to a Chinese cultural context may influence an individual's view of psychotherapy and counselling.

6.2.1 Possible explanations of the proposed mechanism

In the quantitative phase, the extent of adherence to Chinese traditionality was found to be a significant predictor to Taiwanese mothers' attitudes towards professional psychological help through significant mediations from emotion regulation strategies and stigmatisation towards mental illness. The qualitative follow-up interviews, analysed by the IPA framework, revealed three possible reasons, which were pivotal in explaining further why the proposed mechanism could be established through statistical examination in Phase one.

6.2.1.1 Stigmatisation towards mental illness.

First of all, the stigmatisation of psychiatric disorders is prevalent in Taiwanese mothers' accounts. Stigma towards psychiatric disorders was frequently associated with the use of psychotherapy or counselling. Several Taiwanese mothers shared concerns that seeking professional

psychological help might result in being labelled as mentally ill by others and, in turn, being stigmatised. Extracts that demonstrated the evident association between the stigmatisation towards mental illness and one's hesitation to seek professional psychological help are presented in the result section of Phase two (for example, please refer to p.190 – p.192 for more details). Furthermore, different extents of stigmatisation towards different kinds of mental illness were also found in the interviews because of the differentiation between mental difficulties. This may be relevant in some Taiwanese mothers' appraisal of seeking professional psychological help (please refer to p.177 – p.178 for more details). That is, in addition to stigmatisation, general knowledge regarding mental illness may also be contributing Taiwanese mothers' views of professional psychological help.

In short, there is a general tendency towards thinking that mental illness should be hidden because of the negative views associated with it in Taiwanese society. The behaviour or even explicit inclination of seeking professional psychological help can pose a risk of being publicly labelled as mentally ill, which explains the reluctance to seek such help openly.

6.2.1.2 Suppressing emotions as the norm.

Most Taiwanese mothers, who participated in the interviews, argued that they are used to suppressing emotions at least in some contexts. This is especially evident in the case of negative emotions, which were being suppressed or at least expressed cautiously according to emotion expression rules (please refer to section 5.3.2.2 Emotion expression rules, p.159 and section 5.3.2.3 Assumptions behind the rules, p.162 for more detailed descriptions of the emergent rule). These rules emerged from my conversation with Taiwanese mothers, and are guided by values and virtues one must aspire to in the Chinese cultural context (please refer to p.182 – p.187 for detailed descriptions of the underlying values that guide these rules). Being able to suppress one's emotions is one of the most direct ways to indicate one's ability to control emotions. On the contrary, being unable to control one's emotion expression under socially recognised emotion expression rules risks disregarding certain virtues or cultural expectations. Being in control of one's emotions is a virtue and failing to do so is shameful. That is probably why some mothers' accounts implied that expressing emotion can

sometimes be deemed as a sign of weakness. In other cases, expressing emotions is considered useless at solving problems or changing circumstances, and thus meaningless. From this, one can deduce that professional psychological help, which involves in-depth exploration of one's own emotions, may not always seem most useful or appropriate to Taiwanese mothers when they need to deal with their emotions.

6.2.1.3 Cognitive reappraisal and professional psychological help.

Being able to provide new and different perspectives to appraise an individual's problem is a significant positive value attached to professional psychological help. This feature is a primary expectation and characteristic of professional psychological help for the interviewed Taiwanese mothers. It may explain the connection between the use of cognitive reappraisal strategy when regulating emotions with positive attitudes towards professional psychological help (please refer to p.189 for examples). For those mothers, who adopt the reappraisal strategy, professional psychological help can be considered as facilitating the process of regulating emotions that are in need of adjustment.

6.2.2 Modifying and expanding the proposed mechanism

Integrating different data sources not only deepens the understanding of Taiwanese mothers' attitudes towards professional psychological help in a Chinese cultural context but also informs the underlying mechanism and the reasons why it works. The integration of data in Phase two and the results from Phase one also expands my understanding of Taiwanese mothers' attitudes towards professional psychological help by providing directions for understanding the non-significant results, while hinting at other important factors that may impact Taiwanese mothers' attitudes towards professional psychological help.

6.2.2.1 The complexity of emotion expression in a Chinese cultural context

The only hypothesis not being supported in the statistical analysis in Phase one is that emotion expressivity is a significant mediator between Chinese cultural values and attitudes towards psychological help among Taiwanese mothers. The multiple regression model analysis in Phase one suggested that emotion expressivity is overall a significant positive predictor of Taiwanese mothers' attitudes towards professional psychological help ($\beta=.12, p \leq .01$). The mediation effect, however, between Chinese cultural values and attitudes towards professional psychological help through emotion expressivity is not significant. Furthermore, in the interviews, there were clear associations made between cultural background and views of emotion expression, as shown in the previous section and in the Results section of Phase two. Interestingly, even though this is the case, the correlation between Chinese cultural values and emotion expressivity in Phase one was insignificant ($r=-.055$). Further examination of the interviews helped enlighten this paradox and provide a possible explanation of why this happens.

It turns out that in the Chinese cultural context, the expression of emotions is a complex and delicate matter. As found in the interviews, under the guidance of emotion expression rules, the extent of emotion expressivity is closely associated with the perceived closeness and trustworthiness of the person with whom the emotions are shared. This is where the Chinese cultural values come into play, as intimate and private affairs, such as emotions, should only be shared in a closed circle, within the family or with loved ones. Emotion expression rules also suggest the possibility of certain relationships being threatened when expressing emotions. This is due to the fact that sharing negative emotions might trigger similar or other negative emotions in others or sometimes feelings of disrespect in the elderly. These run against the maintenance of harmonious relationships and upholding of virtues such as filial piety emphasised in Chinese culture (for example, please refer to p.159, p.162 and p.182 for detailed descriptions).

In Phase one, however, the items used to assess Taiwanese mothers' emotion expressivity did not incorporate these concepts and, thus, could not possibly capture its complexity. Responding to questions about emotion expressivity, it was impossible for Taiwanese mothers to delineate clearly the

extent of emotion expressivity according to different people, different emotions and different contexts. Hence, the influence of Chinese cultural values on expressing different kinds of, levels of intensity of emotions to different groups of people in various contexts cannot be grasped using the chosen measure. This sheds light on the possible explanation of why Chinese traditionality could not predict emotion expressivity in Phase one; therefore, the mediation was not established for emotion expressivity among the current sample. The possible implications for future research of this finding will be further discussed in the discussion chapter.

6.2.2.2 Other important factors in considering professional psychological help

The analysis and interpretation of Phase two interview data expanded my understanding of Taiwanese mothers' attitudes towards professional psychological help by revealing other possible contributing factors that are beyond the scope of the proposed conceptual framework. Findings enhancing my understanding of Taiwanese mothers' perceptions of professional psychological help, in addition to stigma and emotion regulation strategies, include the following.

The quality of past experience with professional psychological help

Past personal experience related to professional psychological help matters to current attitudes towards such help among Taiwanese mothers. In Phase one of the current study, I collected data from Taiwanese mothers regarding their past experience with professional psychological help, and included it as a control variable in the parallel mediation model testing, as results showed that it contributes to a positive prediction of attitudes towards professional psychological help. It was designed, however, as a binary question asking if they had or had not sought such help in the past. The results from Phase two showed that this was not the whole picture. Conversations with several Taiwanese mothers pointed to the fact that it is not only the dichotomous concept of having had past experience with professional psychological help or not that would affect one's current attitudes towards such services. The quality of that past experience is probably more crucial in determining one's willingness to seek such help in the future when necessary. This includes seeking professional

psychological help for themselves or observing others' experience in utilising such services. Overall, the quality of the experience and the effectiveness of the intervention can have an impact on current attitudes towards psychotherapy and counselling.

Hsieh's experience can be used as an example to demonstrate how the quality of past experiences with professional psychological help can affect one's attitudes towards it. She exhibited rather conflicted attitudes towards professional psychological help throughout the interview, which can be explained as follows. She has an autistic son, who has benefited from professional psychological help. Therefore, as far as her son was concerned she showed quite positive attitudes towards seeking professional psychological help. As regards herself and others though, she showed doubt and her statements were contradictory. This may be due to her own past negative experience with related services.

Hsieh: As for this part...I will first consider, will think of, if we can communicate.

Me: Oh, if we can communicate, with psychotherapist, that is, between [you] and the psychotherapist, is there a way –

Hsieh: Yes. Because in fact I...have seen that kind...for sure there is good and bad, and I have seen bad, it is, not to say he is bad, it is he is kind of...I think it's just a doctor, just that he can't...because obviously those people who go [seek professional psychological help] are actually sick, and since you are a psychologist you should understand their psychology even more, [you] should know how to guide them, and not, not like you constantly...just build [the image], I am the doctor, you listen to whatever I say, I won't listen to anything you say.

In addition, common confusions with other mental health professionals were revealed in the interviews (please refer to p.194 for examples). Experiences with these professionals may be conflated as a whole due to lack of clear understanding for mental health services. These may make past experience with related mental health services also important in the development of attitudes towards

professional psychological help among Taiwanese mothers, due to the confusions of roles in the minds of potential users.

Social support system as both advantage and risk.

In Taiwanese society, according to the interviewees, individuals enjoy the benefits of a very strong social support system. The majority of the mothers mentioned that, as a priority, they often shared feelings with people close to them. This may result from an emotion expression rule mentioned above, namely that the proclivity to express emotions depends on the closeness one feels with the person his or her emotions are shared with. This suggests that in Taiwanese society, there might be a strong social support system for individuals in difficulty. What this implies for seeking professional psychological help is that professionals like psychotherapists or counsellors cannot easily replace the close-knit social network supporting the interviewees. Therefore, the need to talk to a stranger is questioned.

The following extract from Wang's interview is an example of how some Taiwanese mothers may label psychology professionals as outsiders or strangers, compared to their own support system.

Wang: Or them, I don't know, probably [I] also think that I can just talk to my friends, why would I go talk to you (professional psychological help), and, right, and talking with a stranger, and after all, to talk about private stuffs inside my heart, right, probably it is not that easy to speak out.

Me: Oh, so...—

Wang: Unless it is that [situation] people around you, all, all are difficult to share, you really cannot find someone to talk to, then probably go find a stranger, like people will go find friends on the Internet, I don't know who is there anyway, whatever I say, you will not know who I am, place like that, probably then [people] will go to a psychologist.

Interview with Fang also revealed that she considered psychological help professionals as outsiders, and her close social support network is preferred over such services when facing emotional distress.

Fang: However, I think [I would] still prioritize [finding] people who are close to me. I think that finding a psychologist, that is already a very... unless people close to you ignores you?

Me: Oh, so, it means that the resources around all...can't be used, like this?

Fang: Yes, is, I think is it to that kind of extent? Are there no family, no friends? Right..

Me: So [you] would think to start with family and friends.

Fang: Right, right, right.

Me: Then if [it is] really...can't [be used]. –

Fang: Because only family and friends can emphasize with all your feelings ah, more able to ah.

As can be seen from the above, the prioritisation of one's social support system over professional psychological help may benefit Taiwanese mothers at a time of emotional distress. This may also avert them from using professional psychological help, as their need for support may be satisfied through that social support system. In the Chinese cultural context, however, such a social support system may sometimes also act as a barrier towards an individual seeking much-needed professional help. According to the oft-repeated standard in Taiwanese society, when in difficulty, including emotional difficulty, seek out first those closest to you. This network, in turn, may also hold this expectation and consciously or unconsciously force one to at least try and seek help from them at first, before seeking an outsider's help. If an individual shows the intention of seeking professional psychological help or actually seeks such help, sometimes a drawback might be that they may also feel obliged or forced to share the specifics of their distress with their support network. In order to avoid conflict, awkwardness or unease in their close relationships due to the concerns associated with sharing

emotional experiences and stigma towards mental illness, some may choose to deal with their problem quietly without risking anyone knowing. This may reduce an individual's willingness to seek professional psychological help, as it may raise concerns among those closest to them. In these ways, one's social support network may also pose a risk to one's psychological well-being, especially when it cannot provide the support one needs, while at the same time making it more difficult for that individual to seek other help.

Chu shared her observation of a dilemma between having a tight relationship with one's family and one's need for privacy and space, as well as its implication on seeking professional psychological help. The following extract demonstrates how the strong social support system in Taiwan may act as a double-edged sword.

Chu: Right, if there is any...because it is likely that some moms want to [seek] counselling, but she probably does not want to let her family know, right.

Me: Are there any considerations?

Chu: For example probably don't want to be thought by family...that are, [if] there is nothing, then why are you going? Or probably turn into family being over-concerned, something like that. Or probably family will persist to the bottom of the matter, saying what on earth let you, and probably you will think to yourself, it is because of you! But I probably can't speak out, like this.

Me: Oh, got it. So some mothers would have some concerns about this [seeking psychotherapy and counselling] because [they] feel [their] family might know, and then some reasons are...–

Chu: Right, likely because [the problem] is with the family, but you cannot directly express.

Practical considerations: resources and accessibility.

Practical considerations, such as the cost and time actually involved in using professional psychological help, and the perceived accessibility to such services can affect Taiwanese mothers'

willingness to seek psychotherapy and counselling. The following extracts from my conversations with Yu and Chu are presented to illustrate these considerations (please also refer to p.193 and p.197 for more details).

Yu: [...] So then I think, this psychological health service per se is obvious, even if he could, not necessary to the extent of low-income this, this, just people with economic situation this tight, may also feel this service is a very, very...probably a very expensive thing, right.

Chu: Psychotherapy, psycho-counselling, instinctively is very expensive. And actually I don't know where to find [psychotherapy and counselling] either, actually I don't know either, because because if it is [in a] clinic...because clinics in fact they are based on doctors...and I don't know so-called psychologists and counsellors where on earth to find [them], I only have experience in counselling rooms in a previous school, but, but outside [of school] I really don't know where to find [it].

Confusion with other mental health services.

Confusion of professional psychological help with other mental health services, mostly psychiatric, can sometimes influence Taiwanese mothers' attitudes towards psychotherapy and counselling or reduce their chances of actually getting such help. There is a pattern of culturally based lack of understanding of western-defined psychiatric disorders or mental illness and mental health services among the interviewed mothers (please refer to section 5.3.2.5 Views about mental illness, p.168, p.190 and p.194 for further details). This may be crucial to their attitudes towards seeking professional psychological help when facing emotional difficulty beyond their control. On the one hand, as described in the previous chapter, this confusion results in consulting with the more accessible psychiatric services when actually in need of professional psychological help. This may reduce the chances of an individual receiving the appropriate help even when they want to or are interested in professional psychological help if the coordination between professionals is not good enough (please

refer to refer to Chu and Yu's experience on p.195 for further details). On the other hand, the association between the stigmatisation towards mental illness and seeking professional psychological help may be strengthened because of the confusion with other mental health services, like psychiatry. For example, statements given by Wu when asked if she had considered seeking professional psychological help in the past can demonstrate how the confusion described above can contribute to the reluctance in using professional psychological help because of stigmatisation. (please refer to p.177 for more details). Therefore, the conflation of professional psychological help with other mental health services might in fact reduce one's chance to seek psychotherapy and counselling, even if they think they might need such services.

6.3 Possible transition of cultural values and attitudes towards professional psychological help

I believe that there are signs suggesting that there might be a transition in cultural traditional values among Taiwanese mothers and, hence, some dynamic fluctuation in their views on professional psychological help. Signs of changing attitudes towards seeking professional psychological help emerged from the commonly observed conflicting attitudes in Taiwanese mothers' accounts. What is more, mothers directly admitted that there is currently an ongoing transition regarding adherence to cultural values and attitudes towards professional psychological help (please refer to p.156 for further details). In conjunction with the results from the statistical analyses in Phase one suggesting the indirect influence of cultural values on attitudes towards seeking psychological help among Taiwanese mothers, these transitions may very possibly be related to the fluctuating attitudes present in Taiwanese mothers accounts. Awareness of traditional Chinese values along with the motivation to change among some Taiwanese mothers may impact how they view psychotherapy and counselling today.

6.4 Summary

In conclusion, by comparing and combining the two phases of the study, a holistic understanding of Taiwanese mothers' attitudes towards professional psychological help was developed. Analyses of the questionnaires provided numeric evidence of the proposed mechanisms underlying the relationship between Chinese cultural values and attitudes towards professional psychological help among Taiwanese mothers. The interview data complemented the understanding of the mechanisms by shedding light on the reasons behind these mediations. Furthermore, both unsupported hypotheses in Phase one and evidence found in the interviews elucidated and expanded my understanding of how Taiwanese mothers view seeking psychotherapy and counselling.

Finally, I want to share one extract from my conversation with Chen, as I believe it can illustrate what the current project is about very well. From this quote alone, one can get a glimpse of the entire proposed mechanism, that is, the connection between traditional cultural values and attitudes towards seeking professional psychological help for one's children through the influence of ideal emotion expressivity and the prevalent stigmatisation towards mental illness. Also, the differences in the level of adherence to cultural values across generations, and the resulting possible transition of attitudes towards psychological help are also evident in Chen's experience.

Me: Then you think in the process of considering whether to seek professional psychological help, what sorts of factors probably need to be considered?

Chen: Hmm...probably will consider about, regarding children, is he, just that doctor is he...for example specialised in children. And then or, where to find these sorts of resources? And then probably...[I] will not let my mother-in-law know this thing, right, [I] just feel...

Me: Why [would you] feel [you] need to avoid this?

Chen: I think they...just...my parents should be fine, but [I] just think [my] mother-in-law probably she will think...children are all like this, and [they] don't need to...don't need

to...do this, and then she will think children, or she will think about this and that, because she does not understand this thing, she just does not understand children's psychological states, she will probably have some misunderstanding, she will say, like for example she will think if your children have mental problems, or children are blah blah blah, because they, my mother-in-law their ways of education are more like when I was little, she just, you just endure no matter what, when you want to cry you...just you need to endure, you cannot cry, you want to lose your temper, children cannot lose temper, you need to be restraint, but in my view I think it might be due to, I was suppressed when I was little, I then think this is not so good, so, I would tell my children, it is fine, you can cry if you want to cry, I think her emotions need expressing, and then when you finish crying, you want to talk to me, I am willing to help you solve [it], [if] you are not willing to tell me, that is fine as well, right, I think, I feel should be because me and my mother-in-law probably are somewhat different on ideas, so if hypothetically when really need to go [seek professional psychological help] I probably will not, just I will, just not let her know.

Chapter 7. Discussion

7.1 Overview of the study and results

According to recent research (Fu et al., 2013) and mass media report (eg. Health For All editors, 2017b; Appledaily, 2017), the prevalence of mental illness is very high in Taiwanese society, and so is the demand for psychotherapy and counselling. Both seem to be on the rise. This signifies the need for professional mental health services, including professional psychological help in Taiwan for people suffering from various types of mental distress. Both my MPhil and past research, however, have suggested that professional psychological services in societies immersed in Chinese cultural values, Taiwan included, are severely under-utilised (C. H. Chang, 2014; Kung, 2003; Ma et al., 2010; Soong, 1998). One salient example can be found in Soong's (1998) early investigation of how Taiwanese people manage anxiety or depression. As little as 1.8% of respondents considered the option of "visiting a counsellor", and this was less than the already low percentage of 4% who chose to visit a psychiatrist. Consistent with this early investigation, my MPhil project also identified Taiwanese mothers' reluctance to use professional psychological help, and that psychotherapy or counselling were not in their toolbox for dealing with emotional distress beyond their control. This suggested that professional psychological help is not a preferred strategy to deal with emotional or mental distress in Taiwanese society. In light of the above, I embarked on the current study, aiming to provide a clearer view of the phenomenon of under-utilisation of professional psychological help in Taiwanese society through first obtaining a better understanding of the formation of attitudes towards seeking such help in the Chinese cultural context. Building on past theories and empirical studies, my project proposed a framework to understand how Chinese cultural values might shape attitudes towards professional psychological help, and its underlying mechanisms, among the current generation of Taiwanese mothers. In order to achieve this aim, I examined the interrelations of possible contributing factors, as well as explored their subjective meanings to Taiwanese mothers. An explanatory sequential mixed-methods design was adopted in order to approach the research question. This was considered the optimum design because by collecting and analysing both quantitative and qualitative data, this thesis benefited from two sources of data, instead of one. The value of the mixed-methods design lay in allowing me to develop a more holistic understanding of the research problem by answering the how

and why at the same time. This approach was implemented in the hope of identifying and elucidating as far as possible the reasoning behind the views expressed by the Taiwanese mothers, by integrating the available data. This will be demonstrated further in later discussions.

In this study, as described above, the mixed-methods approach was implemented in a two-phase design. Through the concept of using different methods for different inquiry components, a detailed understanding of the phenomenon was attempted. In Phase one, an online questionnaire survey method was used to collect data, and quantitative data analyses were conducted to test the proposed conceptual framework examining how Chinese cultural values may impact Taiwanese mothers' attitudes towards psychological help through emotion expressivity, emotion regulation strategies and stigmatisation of mental difficulties. Building on the findings of Phase one, in-depth interviews with purposively selected Taiwanese mothers were conducted in Phase two to explore the mechanism further by attempting to interpret and understand their subjective experience of each concept and the relationships between them.

The overall results of the project showed that Chinese traditional cultural values do have an impact on the formation of negative attitudes towards psychotherapy and counselling. Evidence presented from both phases supported that Taiwanese mothers' attitudes towards psychotherapy and counselling were related to their extent of adherence to Chinese traditional values. The results of correlation analysis and the regression model from Phase one showed a general trend that Chinese traditional cultural values, along with emotion expressivity, emotion regulation strategies and stigmatisation towards mental illness were all related and formed significant predictors to attitudes towards seeking professional psychological help among Taiwanese mothers. Particular interviewees from Phase two also demonstrated that being in a Chinese cultural context does sometimes raise certain concerns in the form of obstacles when considering professional psychological help.

Furthermore, identical to the proposed mechanisms, the results from the mediation model testing in Phase one suggested that the impact of Taiwanese mothers' cultural inheritance on their attitudes towards seeking professional psychological help was indirect and mediated through other important factors. These are emotion regulation strategies and the stigmatisation towards mental illness,

which act as significant mediators between Chinese traditional cultural values and attitudes towards seeking professional psychological help. The proposed mediation mechanisms were established through statistical testing in Phase one. The only hypothesis not being supported was the mediating role of emotion expressivity. As mentioned earlier, although emotion expressivity itself can positively predict more positive attitudes towards professional psychological help, it does not successfully mediate the relationship between Chinese cultural values and attitudes towards professional psychological help among the current sample.

Through integrating the exploration of a few individual cases in Phase two, I was able to unveil possible rationales behind the relationships found in Phase one. In addition to better understanding and explaining the proposed mechanisms, conversations with ten Taiwanese mothers also helped me in gaining a more holistic understanding of the phenomena in question by expanding my knowledge of attitudes towards professional psychological help among Taiwanese mothers. The most important underlying reason was found to be the risk of being associated with mental illness and even stigmatised for seeking professional psychological help. Being restrained by complex emotion expression rules and deeply ingrained habits of using suppression as a regulation strategy may also cloud positive views of professional psychological help, as the latter involves the thorough exploration of emotional experience with an outsider. Interestingly, the existence of a set of complicated emotion expression rules may also explain why emotion expressivity is not a significant mediator in the mediation model in Phase one.

Through the immersion in individual cases, I was also able to gain insights that could not have been captured if the proposed mechanisms were tested by pre-designed questionnaires in Phase one alone. These insights expanded my understanding of Taiwanese mothers' attitudes towards professional psychological help, and will help me to modify the mechanism in future work. In addition to the above-mentioned complexity of emotion expression rules, the interviews led me to consider other potential individual and environmental contributors in shaping views regarding seeking professional psychological help in the Taiwanese social context. These possibly very important factors include the quality of an individual's past experience with professional psychological help, practical

considerations, such as resources and accessibility, the existence of a close-knit social support system, and the level of knowledge regarding mental health and mental health services in general.

Interestingly, in spite of the evident indirect impact of Chinese traditional values on Taiwanese attitudes towards seeking professional psychological help through the proposed mechanisms in Phase one, and the clear explanations that emerged from the Taiwanese mothers' accounts in Phase two as to why these mechanisms exist, there is evidence showing that the level and form of adherence to traditional Chinese cultural values may be undergoing a transition, influencing by extent attitudes towards professional psychological help. Some Taiwanese mothers overtly shared their observations of these collateral transitions. At other times, the transitions manifested themselves implicitly in the conflicting accounts of certain mothers regarding attitudes towards professional psychological help or their views on cultural values.

In sum, this study argued that nationality, cultural background or cultural values per se do not directly determine one's attitudes towards or willingness to seek professional psychological help, and proposed a conceptual framework attempting to understand the underlying mechanisms. The framework was supported and expanded by the overall findings. That is, it was found that Taiwanese mothers' attitudes towards seeking professional psychological help are shaped by the extent of their adherence to Chinese traditional values, through culturally relevant factors, including concepts about emotions and views regarding mental illness. Additionally, in order to ultimately effect any change in terms of the utilisation of professional psychological help among Taiwanese mothers through expanding a fuller and more complete understanding, there are other significant factors worth considering in future research.

7.2 Contributions

Through my literature review, I was able to identify several constituting elements of the phenomenon of under-utilisation of professional psychological help in the Chinese cultural context. Investigating these pieces of information further led me to wonder if there is a way to integrate these relevant ideas. Through my exploration of the literature, however, I found that a holistic conceptualisation of the mechanisms underlying this phenomenon is still wanting. This means that previous work has documented the phenomenon of under-utilisation of professional psychological help in societies, which adhere to Chinese cultural values, but the reasons behind it were not yet explored in a comprehensive manner. Furthermore, only a few contributors to the unwillingness of seeking psychotherapy or counselling were thoroughly researched in conjunction with the cultural context. Other concepts, which are also possibly culturally relevant, were seldom studied under a cultural lens.

This study contributes to the understanding of the utilisation of mental health services in a Chinese cultural context by corresponding, connecting and integrating and expanding this field of work, advancing understandings of attitudes towards mental health services in a Chinese cultural context.

7.2.1 Correspondence with existing literature

The findings of the current project correspond to findings in previous literature in various ways. First, they document the existence of the phenomenon of under-utilisation of professional psychological services alongside more negative and reluctant attitudes towards professional psychological help in societies that adhere to Chinese cultural values, including Taiwan (e.g. Soong, 1998; Deane & Chamberlain, 1994; Lin, 2001; Kung, 2003; Chang, 2007a; 2007b; 2008; Fung & Wong, 2007; Ma et al., 2010; Chang, 2014). My interviews with ten Taiwanese mothers pointed to a similar under-utilisation trend, as some of them exhibited reluctance and doubt when considering seeking professional psychological help, even when they had experienced distress in the past. Also, one interviewee was a professional clinical psychologist. She directly shared her observation that there

may be a high proportion of people who might need professional psychological help but do not seek it due to a variety of barriers. Nonetheless, in my conversations with these ten Taiwanese mothers, despite evident obstacles in contemporary Taiwanese society, it is notable that there is also a trend of increasingly more open attitudes towards professional psychological help.

Second, in reviewing emotion expressivity and regulation in the Chinese cultural context in the literature review chapter, an amount of research indicated that Chinese culture has its own unique perspectives on emotions and may, in turn, determine the preferred or normalised ways of expressing or regulating emotions (e.g. Camras et al., 2006; Cheah & Rubin, 2003; Davis et al., 2012; Eid & Diener, 2001). For example, emotions are not only considered as harmful to an individual's body and soul, they can also sometimes pose risks of disrupting interpersonal harmony (Chan, 2012). Under the influence of these philosophies, emphasis on indirect emotion expression, emotional restraint and control, and emotionally self-disciplined behaviours were repeatedly observed in individuals with a Chinese cultural background (e.g. Chen, 2000; Anolli et al., 2008). Building on these, I proposed that this unique perspective may be associated with the reluctance of disclosing personal feelings to psychology professionals, as it involves full exploration of and engagement with one's own emotional experience. The findings in Phase one suggested that the overall emotion expressivity and emotion regulation strategies are indeed significant predictors of Taiwanese mothers' attitudes towards professional psychological help. Among them, traditional Chinese values shape an individual's preference of regulating emotions and, in turn, affect their view on professional psychological help. This corresponded with my hypotheses. Nonetheless, a surprising contradictory result was found regarding the overall expressivity of emotions not being a significant mediator between Chinese cultural values and attitudes towards professional psychological help. The reason why this particular mediation mechanism could not be established through statistical testing will be discussed in further detail in a later section on how the findings expand the understanding of Taiwanese mothers' attitudes towards seeking professional psychological help.

Last but not least, both in my MPhil project and the literature review here, I repeatedly encountered stigma and negative stereotypes towards mental illness, both of which are especially

pervasive in Chinese cultural groups, including Taiwanese society, and are very likely related to negative attitudes towards professional psychological help (e.g. Cheon & Chiao, 2012; Furnham & Wong, 2007; Hsu et al., 2008; Ryder et al., 2000; Shokoohi-Yekta & Retish, 1991; Yang, 2007; Yang & Kleinman, 2008; Yang et al., 2013). The data from both questionnaires and interviews in this thesis suggests that stigmatisation towards mental illness and its association with negative attitudes towards professional psychological help are still prevalent. The findings of condition process modelling in Phase one corresponded with past cross-cultural studies, and suggested that Chinese traditional values are significantly related to an individual's extent of stigmatisation towards mental illness, in turn, affecting an individual's attitudes towards professional psychological help.

Through my interviews with ten Taiwanese mothers, the rationales behind the established mechanisms became clearer. That is, a person's intention or action of seeking psychotherapy and counselling implies the possibility that this individual has psychological problems, or the possibility that this individual deals with emotional issues using strategies that violate cultural norms. Consequently, these intentions or actions are more likely to be resisted or even stigmatised due to the above-mentioned characteristics of Chinese societies.

7.2.2 Filling in the gaps by connecting and integrating past literature

Previous research conducted in certain cultural contexts has attempted to tackle individuals' attitudes towards seeking professional psychological help, offering insights on this topic. Few studies, however, have adopted a holistic perspective to unpack this phenomenon. The overarching contribution of this thesis is its attempt to connect the fragments and fill in some gaps in this field by proposing a framework demonstrating the underlying mechanism between Chinese cultural values and attitudes towards professional psychological help.

One of the primary contributions of this research is the demonstration of cultural variance in the same cultural context. Previous studies tend to assume an individual's cultural adherence solely based on location, nationality, ethnicity or cultural background (e.g. Diala, Muntaner, Walrath,

Nickerson, LaVeist & Leaf, 2001; Arora, Metz & Carlson, 2016). They focus on cross-cultural difference and assume that people from one location or of the same nationality or ethnicity will possess a homogeneous culture, excluding the possibility that sometimes an individual with Chinese inheritance may not be very culturally Chinese. Such an assumption of people's cultural inheritance has been gradually questioned, and there is a tendency to explore how individuals could be culturally different in certain cultural contexts. For example, there is a rising trend to assess actual Asian cultural values or the extent of acculturation among people with Asian cultural background in societies consisting of a large proportion of immigrants, like the United States (e.g. Leong, Kim & Gupta, 2011; Chang & Chang, 2004). Having said that, few studies have attempted to assess individuals' cultural values within a homogeneous cultural context, for instance, Chinese culture. To the best of my knowledge, there is only one unpublished dissertation, written by Tieu (2013) and examining attitudes towards professional psychological help, that directly uses Chinese cultural beliefs as the indicator for enculturation among older Chinese immigrants living in Canada. This thesis goes beyond past research by addressing the possibility of various cultural profiles existing in the same cultural context.

Moreover, this research contributes to the literature by connecting attitudes towards seeking professional psychological help with underlying mechanisms. Previous studies examined individuals' extent of adherence to a certain culture, for example, assessing the degree of acculturation of Chinese immigrants, only considering how acculturation or enculturation can have an impact on their attitudes towards seeking professional psychological help (e.g. Zhang & Dixon, 2003; Miller et al., 2011; Kim, 2007), thus, ignoring the more specific reasons influencing individuals' attitudes towards seeking professional psychological help, and how culture can shape such an attitude. Filling in this gap, this study demonstrates how cultural values can influence attitudes towards professional psychological help through the prevalence of fears, such as being labelled mentally ill and stigmatised. By proposing the mediation model explaining the effect of Chinese cultural values on attitudes towards professional psychological help among Taiwanese mothers, this thesis was able to examine whether these fears may eventually hinder Taiwanese mothers from seeking professional psychological help for themselves or for their children. Therefore, this research also advances the literature by elaborating on the

explanatory mechanism of the influence of Chinese cultural values on attitudes toward seeking professional psychological help.

In brief, gaps were identified in the field of research regarding attitudes towards professional psychological help in a Chinese cultural context, which the present study has attempted to bridge. Past research that touches on relevant predictors, such as the stigmatisation towards mental illness, of attitudes towards professional psychological help has not been able to address the issue of an individual's level of adherence to cultural values. Conversely, research that takes the assessment of cultural values into account often neglects its connection to constructs that can link cultural values and attitudes towards professional psychological help. By examining the model delineating Taiwanese mothers' attitudes towards seeking professional psychological help in the Chinese cultural context with the proposed underlying mechanisms, this study helps integrate insights from the existing literature, and offers a more in-depth understanding of the under-utilisation of professional psychological help in Taiwanese society.

7.2.3 Expanding the understanding of the research problem

The findings of this thesis have expanded the understanding of the relationship between Chinese cultural values and attitudes towards seeking professional psychological help in Taiwanese society in four ways, which will be discussed in more detail below. First, the present study has expanded the scope of the research problem by using a particular and important type of sample, the current generation of Taiwanese mothers. Second, the surprisingly contradictory findings stimulated reflection on the measurement of emotion expressivity in the Chinese cultural context. Third, the overall findings also act as a reminder for researchers to consider the possibility of acculturation in an indigenous study. Last but not least, the findings of the current project allowed me to refine and modify my conceptual framework on the underlying mechanism between Chinese cultural values and attitudes towards seeking professional psychological help.

7.2.3.1 Expanding the scope of relevant investigation.

This thesis contributes to expanding our understanding of attitudes towards professional psychological help in a Chinese cultural context in several ways. First of all, as previously discussed, the attitudes and utilisation of mental health services among individuals of Asian or Chinese cultural background have been widely investigated. Nonetheless, it is worth noting that most empirical studies in this field use samples consisting primarily of university or college students (e.g. Gim, Atkinson & Whiteley, 1990; Zhang & Dixon, 2003; Miller et al., 2011; Chang, 2007a; 2007b; 2008). There are, however, other groups of people that are in need of professional psychological help. This study expanded the understanding of the phenomenon in question by examining a proposed mechanism between Chinese cultural values and attitudes towards seeking professional psychological help among Taiwanese mothers, through recording their experiences. This is important, as it brings to the foreground the perspective of another group, beyond students, which is associated with whether future generations (i.e. their children) will have the opportunity to receive such help should they need it.

7.2.3.2 Rethinking the measurement of emotion expressivity.

The non-significant results in Phase one combined with the interviews in Phase two have also expanded my understanding of the relationship between Chinese cultural values, emotion expressivity and attitudes towards professional psychological help. The statistical test findings in the current project suggested that there is no significant association between Chinese traditional cultural values and general emotion expressivity among Taiwanese mothers. This is very likely the cause behind the fact that Taiwanese mothers' general emotion expressivity turns out not to be a significant mediator between their Chinese cultural values and attitudes towards psychological help.

Combined with the many complicated emotion expression rules embedded in the Chinese cultural context that have emerged from Taiwanese mothers' accounts, it seems odd to draw a conclusion suggesting that Chinese cultural values are not associated with emotion expressivity. It is more likely that the adopted measure was not the optimal choice for capturing a more complete

understanding of an individual's emotion expressivity. During the interviews, I found that the emotion expressivity of Taiwanese mothers depends on multiple conditions. These conditions involve the kinds of emotions being expressed, the people with whom these emotions are being shared, and their origins. Emotion expression in a Chinese cultural context is a complicated process, restrained by multiple rules, and requires careful consideration. Failure to adhere to these rules may bring about negative consequences. Evidently, the measure used in Phase one to assess Taiwanese mothers' emotion expressivity did not incorporate these conditions. Therefore, Taiwanese mothers needed to adopt a very general view of their own emotion expressivity when trying to answer relevant questions. This may have caused the link between Chinese cultural values and emotion expressivity to be lost in between items. The majority of research uses self-report questionnaires (e.g. Chen, Cheung, Bond & Leung, 2005; Su et al., 2015), similar to the BEQ adopted in this thesis, or observation to measure general or instant emotion expressivity (e.g. Butler, Lee & Gross, 2009; Tsai, et al., 2000). Apparently, there is no measure that can successfully capture this volatile concept in the Chinese cultural context. In Taiwan, Chiang (2018) published her most recent study regarding gender differences in emotion expression in Taiwan. In this study, Chiang developed an emotion expressivity scale with contextual considerations by differentiating among different kinds of emotions and levels of closeness. Even though, according to my findings in this thesis, this attempt may still be inadequate in capturing all facets of emotion expressivity among individuals in a Chinese cultural context, Chiang's research demonstrates the rising awareness of the necessity of considering context differentiation in studying emotion expressivity in Taiwan. A modified measure, which can help the characterisation of different styles of emotion expressivity in different contexts successfully and clearly, is worth developing in the future.

7.2.3.3 The transition in the adherence to traditional cultural values and embracing other cultures.

Emergent conflicting attitudes towards cultural values and professional psychological help has shown that an ongoing transitioning process is in place regarding adherence to Chinese cultural values and attitudes towards seeking professional psychological help. Even though the cultural origins

of Taiwan are rooted and immersed in ancient Chinese cultural values, it has also been absorbing values, knowledge and beliefs from everywhere else in the world, including the West. Especially in recent times, with the increasing speed of information sharing, the concept of acculturation or cultural adaptation may be worth studying even in a localised context. In light of this awareness, the impact of cultural values on attitudes towards professional psychological help or any other relevant concepts may be better considered under a transactional lens, as a cross-sectional perspective may not always be entirely adequate. A review paper (Selkirk, Quayle & Rothwell, 2014), discussing a number of immigrant studies in North America and Europe, has drawn the conclusion that the values of an individual's original cultural heritage are gradually becoming diluted through time in the host country. Subsequent generations are more likely to be exposed to a wide range of cultural influences under a longer period of time and, therefore, develop a new mixed cultural heritage. In addition, Yang (1994), a Taiwanese indigenous psychologist, used empirical studies to demonstrate that an individual's traditionality and modernity are multi-dimensional constructs that can co-exist in an individual's value system. Even under the impact of Western or euro-centric values, traditional values and subsequent behavioural characteristics may still co-exist or be weakened to various extents, but not completely replaced by other values. Huang (1995), another indigenous psychologist specialising in the Taiwanese context, examined university students' perception on generational differences in values. He found that while some traditional values are fading, other core values do not differ much between generations. This means that traditional and modern values can co-exist or possibly be infused into a new value system. This possibility of a mixed value system corresponds with my findings regarding the transitioning of cultural values and the resulting conflicting attitudes of Taiwanese mothers towards professional psychological help.

Furthermore, it is interesting to reflect on whether individuals in a cultural context, which may easily be impacted by other dominant cultures (Taiwan is one such example), may have an advantage in having been granted the opportunity to develop a sense of awareness and reflexivity of their own cultural values and beliefs. Under these circumstances, individuals within cultural contexts which are found at the crossroads of external cultural influences may have the chance to develop a

mixed value system, which provides them the flexibility to fluctuate between different values or adapt to different values within this mixed value system as a measure of protection. For example, an individual with a mixed value system may feel comfortable in using his or her close social support network if in need, while they can confidently switch to other resources, such as professional psychological help, when their social support system proves inadequate. These situations include for example, when an individual deems their social support lack of availability or when an individual appraise the issues as inappropriate to share with their usual support network. Future research may consider further exploration of how these different sets of values interact with each other in the Taiwanese context and their implication for attitudes towards seeking professional psychological help and even mental health outcomes.

7.2.3.4 Expanding and modifying the conceptual framework.

In addition to verifying the proposed mechanisms through statistical testing, the mixed-methods design of the current project also gave me the opportunity to expand my understanding of my conceptualisation of the phenomena in question. Some expansions and modifications were made according to my findings. The newly developed and modified conceptual framework is presented in Figure 7.1, p.232.

Based on my research, I also found other fundamental factors that may contribute to the shaping of attitudes towards seeking professional psychological help. For example, the quality of past experience with professional psychological help, and practical considerations such as accessibility to the service or available resources can all possibly affect the attitudes towards or eventually the utilisation of professional psychological help. Studies recording the influence of past experience of professional psychological help and attitudes towards professional psychological help yielded inconsistent results. While some suggested that past experience is not related to current attitudes towards relevant help (Saunders, 1993; Chang & Chen, 2010), others suggested that past experience may facilitate future seeking attitudes or behaviours (Cheng, Wang, McDermott, Kridel & Rislin, 2018; Dong & Zhong, 1993; Manthei, 2006). This may be related to the findings of this thesis that the quality of past experience of professional psychological help might be more crucial in shaping attitudes than

having had past experience or not. Past research also established that both perceived accessibility (Fung & Wong, 2007; Li & Browne, 2000) and available resources, such as the consideration of treatment cost and household income (Mo, Mak & Kwan, 2007; Selkirk et al., 2014) can contribute to an individual's view of seeking professional psychological help. These are also important to be incorporated in the modified model, as they can form practical barriers to seeking professional psychological help for some individuals in Taiwan. Identifying these barriers in the future can provide directions for the government to consider corresponding policies.

Also, according to the findings in this project that have identified frequent confusions in regard to mental health services and their functions, it is worth considering whether the knowledge of differentiating among various types of mental health services can make a difference in seeking professional psychological help. As a recent study of university students of diverse ethnic backgrounds suggests (Cheng et al., 2018), mental health literacy, defined as the ability to differentiate a mental health condition from general stress, attribute mental disorders, and having knowledge of potential risk factors and available professional help, can positively predict attitudes towards professional psychological help among university students. Conversely, Chen and Mak (2008) found that lay beliefs about causes of mental illness can significantly predict help-seeking likelihood. Interestingly, while environmental/hereditary was related positively to help-seeking likelihood, social–personal causes was negatively related to it. Also, there may be some differences in the decision-making process of seeking various kinds of mental health services. Studies have suggested that individuals with Chinese cultural inheritance sometimes tend to emphasise and report somatic symptoms in order to represent psychological distress (Ryder et al., 2008; Wang & Zhao, 2013). This tendency might be the individual attempting to find an opportunity to attribute experienced distress to external and more acceptable causes, and protect the self from the questioning of personality flaws or lack of virtue, which implies failure of complying to traditional cultural values. Besides this possibility, this may also be due to individuals' lack of awareness of their own emotional states. The same rationale can be applied to attributing spiritual reasons to mental or psychological distress. This may not only be about the person in distress protecting themselves from feeling inadequate, weak or incompetent, but also about

protecting their family from being inferred as the source of one's difficulty both genetically and environmentally speaking and, therefore, preventing the risk of being stigmatised bringing shame to oneself and one's family. In sum, these characteristics in conjunction with the confusions between mental health services are worth being investigated further in the future for their implication on attitudes towards seeking professional psychological help in a Chinese cultural context.

Among other possibly important contributors identified, social support is relevant in the Chinese cultural context, as I believe it can act as both a protective and a risk factor to an individual's psychological well-being. Social support networks have been shown to have an impact on one's attitudes and willingness to seek mental health professionals (Chang & Wang, 2015; Vogel, Wade, Wester, Larson & Hackler, 2007). Some studies, such as Vogel and Wester (2003), have demonstrated that when an individual subjectively receives more social support, they will exhibit more positive attitudes towards seeking help. Others, like Hsia (2000), found that when university students appraise their original social support system as efficacious, they do not feel the need to seek help from counselling services. This means that the essence of the social support system itself might be important in contributing to an individual's view on seeking professional psychological help. In order to explain this further, enjoying strong and close social support evidently can be beneficial to an individual, when it comes to a time of need, as they may easily find abundant resources around them. This is one way that a close social support system plays a role of a protective factor to affect an individual's attitudes towards professional psychological help, as people with an abundant social network may appraise professional help as unnecessary at a time of psychological distress. Another way is through the social influence of one's views on seeking professional help. For example, Vogel and his colleagues (2007) found that social influence is important for an individual's attitudes and willingness to seek mental health services. Among their sample of 746 college students, they found that those who were prompted to seek help and who knew someone who had sought help in the past had more positive attitudes towards seeking mental health services. An indigenous study of university students in Taiwan (Dong & Zhong, 1993) found that if an individual believed that their significant others would support them in seeking professional counselling, this would positively affect their willingness to seek relevant help.

There is also, however, an implied potential risk in some scenarios, when a close social support system may also deprive an individual from the opportunity to seek professional psychological help, by influencing their attitudes towards it or by imposing social pressure on them. Although not in the originally proposed mechanisms, through the integration of the interview phase, this thesis also found the potential significance of social support and social influence on Taiwanese mothers' attitudes towards professional psychological help. These factors may very likely render it more difficult to develop positive attitudes towards seeking psychotherapy and counselling, especially when the current generation may still be supported by a social network consisting, to a large extent, of older generations, which might still be more distrustful attitudes towards seeking professional psychological help. Also, according to the concerns emerged from the interviews, it is worth exploring if a close social support system, which is more likely in place in a Chinese cultural context, can impose pressure on an individual's decision towards seeking professional psychological help by depriving their sense of privacy or by making them more aware of the risk of damaging harmonious relationships with those close to them

In short, it is worth incorporating the various functions of a social support system in future research, along with other important factors found in this thesis, for the purposes of conceptualising modified and expanded mechanisms underlying individuals' decisions of seeking professional psychological help.

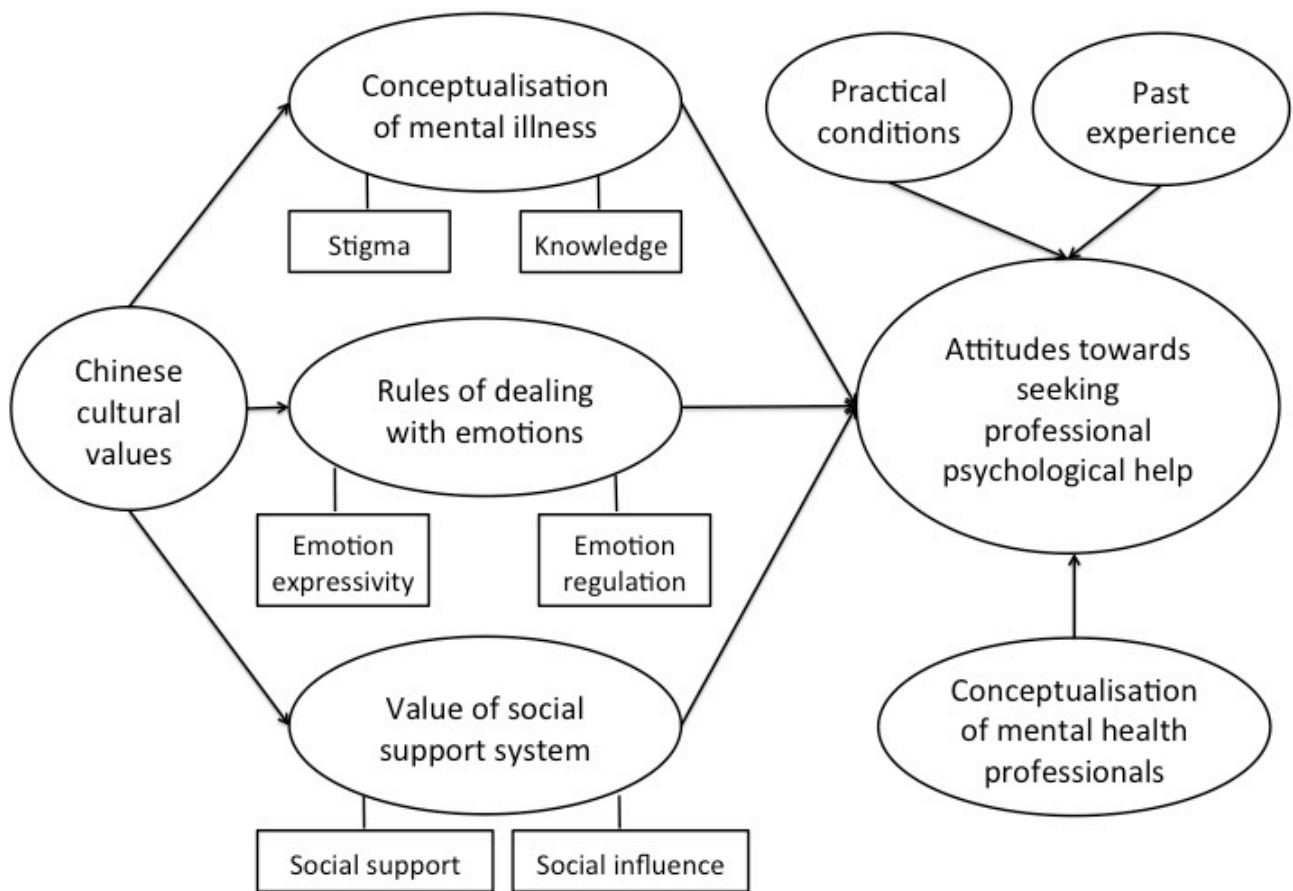


Figure 7.1. The modified conceptual framework

7.3 The value of the mixed-methods design

This section discusses the methodological significance of the current research on the understanding of the phenomena in question. An explanatory sequential design was adopted to approach the research problem, under the assumption that by combining and integrating multiple methods, one can balance the strengths and weaknesses of different methods, achieving a better understanding of the underlying mechanisms. As presented in Phase one, the examination of the relationships between Chinese cultural values, attitudes towards professional psychological help and the hypothesised mediators, building on previous research, was addressed using quantitative methods.

The statistical relationships alone, however (namely identifying statistically significant predictors), are not sufficient for understanding the mechanisms underlying these relationships. Therefore, a necessary follow-up qualitative in-depth inquiry (Phase two) using interviews and building on the findings of Phase one was designed in order to elucidate the why, that is, the rationale behind the mechanisms, while also keeping an eye out for emergent insights lost in the general pattern.

7.3.1 The integrative value of multiple phases

The two phases in the current study were given equal weight, as they have an equally important role in addressing the research questions. Taken individually, both quantitative and qualitative data provided partial views in developing a more complete understanding of the underlying mechanism of how attitudes towards professional psychological help are shaped in a Chinese cultural context. Phase one, namely the quantitative phase, uncovered through rigorous statistical testing how the proposed constructs are related to one another. The relationships found between variables in Phase one were expanded and explained in greater detail through qualitative interviews in Phase two. Both the how and the why (Phases one and two respectively) were important in this project in order to obtain a holistic understanding of the phenomena in question. While the quantitative statistical results provided evidence of the trend of relationships between variables with generaliseability, the in-depth qualitative interviews in Phase two examined the nuances behind why these variables may or may not be related to one another.

7.3.2 The value of the quantitative phase in the mixed-methods design

Sampling. One of the ways in which the quantitative phase was complementary to the qualitative is its contribution to providing a framework of sampling for Phase two. Following the sequence of the design of the current study, qualitative data collection and analysis were informed by the findings from the quantitative data analysis. Quantitative and qualitative data can be integrated through the process of connecting. In explanatory sequential designs, two forms of data are connected

because the participants sampled in the qualitative phase can be a purposefully selected sub-sample based on the findings of the survey data (Fetters, Curry & Creswell, 2013). This procedure was followed for choosing the sample for the interviews in Phase two. It facilitated the collection of data from a broad yet specified spectrum of participants.

The possibility of approaching abstract concepts. Using solely questionnaires to extract participants' views about certain constructs is limiting and can contribute to participants sharing less subjective, personal and contextual information. It can be helpful, however, especially for gathering data that involves more complicated and abstract concepts. For example, in the current study, it was difficult for Taiwanese mothers to talk spontaneously and in detail about the Chinese cultural values they adhere to in the interviews. This may be because Chinese cultural values consist of broad and complicated concepts that are not often explicitly discussed. It might also be due to the fact that cultural values are constructs one adheres to unconsciously for the most part, let alone ponder about their meaning. As such, using questionnaires to survey these beliefs is useful. Systematically designed and developed, the questionnaire method aims to assess traditional Chinese values providing a quantitative structured framework for participants to express their views, and the opportunity to researchers to understand subjective views within that framework.

Generaliseability. The quantitative phase of this project also provided grounds for generaliseability to Taiwanese mothers of this generation. The proposed conceptual framework was examined through rigorous statistical testing in Phase one and found that Chinese cultural values were a significant predictor of attitudes towards seeking professional psychological help through the effective mediation of Taiwanese mothers' habits of dealing with emotions and their stigmatisation of mental illness. Findings in Phase one provided evidence that a common trend of relationships between these proposed constructs exists among Taiwanese mothers. This may, thus, strengthen the conclusions

of this thesis by showing that this is not only a phenomenon observed in individual cases but, instead, a finding that is transferable to the population (Taiwanese mothers) under investigation. This might potentially contribute in the future to the development and avocation of psycho-education, as related to the utilisation of professional psychological help.

7.3.3 The value of the qualitative phase in the mixed-methods design

As already seen, Phase one of this study sought to unveil the mechanism between Chinese cultural values and attitudes towards seeking professional psychological help by using quantitative survey methods to gather data related to the proposed conceptual framework with a relatively large sample of Taiwanese mothers. Phase two of this study, bearing the same aim of better understanding the phenomena in mind, sought to examine the mechanism by which these, and possibly other, identified variables from Phase one affect the real-life experience of Taiwanese mothers by using face-to-face, in-depth interviews.

Based on the Results section for Phase two and the overall findings chapter, Phase two extended the value of the current study well beyond simply reporting the existence of relationships between the proposed constructs, to describing why and how these factors influenced Taiwanese mothers' attitudes towards seeking professional psychological help. Furthermore, the openness of the qualitative methods adopted in Phase two brought about findings that expanded the understanding and vision of the researcher on the phenomena in question by revealing other important factors related to Taiwanese mothers' attitudes towards seeking professional psychological help.

Perhaps more importantly, the value of incorporating a qualitative method of inquiry in the current study lies in expanding my understanding by adding new insights and reminding me of those that could potentially be missed by using only the presumed framework. Following the analysis and interpretation of Phase two interview data, the findings revealed other possible factors contributing to the mothers' current attitudes towards psychotherapy and counselling that are beyond the scope of the proposed conceptual framework. While decisions about the interview questions and targeted samples were made in advance to the interviews and were informed by the findings in Phase one for good

reasons, when the interview narrative data were collected, unanticipated findings were revealed highlighting the benefit of adopting a mixed-methods design, which has the potential to uncover different aspects of the phenomenon through an examination of the Taiwanese mothers' subjective worlds.

In other words, the interviews with the Taiwanese mothers not only enlightened my understanding through explaining the reasons underlying the relationships between multiple factors and the attitudes towards seeking professional psychological help in Phase one, but also facilitated further understanding of other contextual factors present in each Taiwanese mother's experience. This is important as these could potentially affect Taiwanese mothers' attitudes towards psychotherapy and counselling, and which would be very likely lost if only pre-designed questionnaires were used.

In conclusion, quantitative and qualitative components consisting of data collection and strategies for analysis are both necessary and helpful in adequately and fully exploring how professional psychological help is perceived among Taiwanese mothers within a Chinese cultural context. Especially in this case, when the purpose of this research is particularly focused on understanding the relevant underlying processes or mechanisms.

Quantitative data collected in Phase one established knowledge of the hypothesised relationships between Chinese cultural values and attitudes towards seeking professional psychological help by analysing numerical data obtained by questionnaires in a large sample. This identified the actual impact the proposed factors had on shaping attitudes towards professional psychological help. Furthermore, the findings suggest that significant statistical relationships between variables may be deemed as a representation of the phenomena extant in the population of Taiwanese mothers. If the inquiry stopped at this phase, however, limitations would include that the examination be confined to the few variables being proposed, and the diversity among Taiwanese mothers, as well as the rationales behind these impacts would not be elucidated. Findings from the qualitative Phase two balanced these disadvantages by providing rich data that deepen and broaden my understanding by incorporating the voices of Taiwanese mothers. In other words, the findings in Phase two corroborated the findings from Phase one by providing evidence for the underlying rationales of the

significant predictions identified in Phase one, and also the possible reasons that can explain the non-significant hypothesis. Furthermore, Phase two findings expanded my understanding of the attitudes towards professional psychological help among Taiwanese mothers in the Chinese cultural context by offering additional perspectives.

7.3.4 The limitation of adopting the mixed-methods design

Despite the values of utilizing mixed-methods as discussed, there are indeed some limitations and disadvantages with the mixed-methods approach that cannot be ignored. One of the most inevitable limitations is that the amount of time and effort one needs to devote to using a mixed-method approach is usually significantly more consuming than employing only one method. This limitation manifested throughout the research process from planning to implementing this type of research. The research design itself requires relatively complex planning and executing. In addition, the data analyses and the process of integrating and crystallizing final interpretations of the results deriving from different data sources are also very time and effort consuming. Due to the versatile nature of implementing mixed-methods research, with my experience I personally would really recommend it to be carried out through team work if resources permit to reduce the time and energy burden of just one individual. Having said that, the valuable and fruitful findings derived through implementing such a methodology proved to be worth all the hard work for me. Nonetheless, the aforementioned should be bore in mind with caution when deciding whether to adopt or when actually utilizing the mixed-method methodology.

Chapter 8. Conclusion

The current study contributes to the research in regard of attitudes seeking towards professional psychological help and the phenomena of the under-utilisation of professional psychological help in the Chinese cultural context theoretically, methodologically and practically. Furthermore, it has pushed me forward towards the next steps on my journey of promoting the psychological well-being of parents and children in Taiwanese society by providing me with a more holistic understanding of the phenomenon and the opportunity of personal development as a researcher.

Theoretically, the current study proposed and examined the mechanisms between Chinese cultural values and the attitudes towards professional psychological help among Taiwanese mothers. The relationships between the extent of adherence to Chinese traditional values, emotion expressivity, emotion regulation strategies and stigmatisation towards mental illness, and their influence on attitudes towards seeking professional psychological help were established and clarified with both numeric and interview data. Taken together, the numerous cultural, personal and practical barriers to seeking professional psychological help may account for the under-utilisation of such help in Taiwanese society. Methodologically, the current study showed that a mixed-methods design can contribute to a more holistic understanding of the research question, and can further enlighten many future directions by not neglecting voices from different perspectives. In terms of practical contributions, this study provides up-to-date insights for practitioners and policy makers in related contexts by demonstrating important factors that may influence attitudes towards seeking professional psychological help among Taiwanese mothers. Being aware of the potential barriers may be useful in promoting and providing such help.

In the discussion chapter, I have argued in great detail for the theoretical and methodological contribution of the current research. Therefore, I want to conclude this thesis by identifying and acknowledging the limitations of the current project, and their implication for future research, by providing practical suggestions for practitioners and policy makers, and finally by reflecting on my own development through this project.

8.1 Limitations and future directions of research

8.1.1 Sample

Although the current study has attempted to broaden the investigation of attitudes towards seeking professional psychological help by adopting Taiwanese mothers as an additional target of inquiry, there are issues to be considered for future research in order to understand the phenomenon fully. Genderwise, the current project chose to extend the exploration to the attitudes of Taiwanese mothers, due to the consideration that mothers are usually the primary caregivers of children in Taiwanese society. As a result of this, their attitudes are considered to be influential in not only deciding whether themselves would seek professional psychological help, but also in determining whether their children would have the opportunities to access such help when in need. This rationale can also be applied to fathers' scenario, as a regard to fathers' input may emerged as a crucial consideration in determining this familial decision. Moreover, gender has been found to be relevant in considering attitudes towards seeking help (e.g. Hammer & Vogel, 2010; Leong & Zachar, 1999; Vogel, Heimerdinger-Edwards, Hammer & Hubbard, 2011). For example, in Chang and Wang's review (2015), females displayed more positive attitudes towards seeking help than males in most studies. It would be, therefore, interesting to explore in the future whether fathers' attitudes towards seeking professional psychological help differ from that of their partners. In addition to exploring parents' attitudes, how partners may influence one another's decision-making process in this respect is worth further investigation.

8.1.2 Measurements for assessing emotion expressivity in the Chinese cultural context

As already seen in the discussion chapter, one of the limitations of the current study is that the questionnaires adopted to measure emotion expressivity are very likely inadequate in capturing the complexity of an individual's emotion expression in the Chinese cultural context. Therefore, according to the findings on complex emotion expression rules in this thesis, future research should aim to find,

develop or modify current instruments into measures that incorporate the consideration of the highly differentiated contexts and conditions of emotion expression, especially when referring to a Chinese cultural context.

8.1.3 Differentiation of emotional difficulties

As emotional difficulty and distress were not defined clearly in my interviews with the participants, which would facilitate a more open exploration of their attitudes, it is very likely the case that Taiwanese mothers devised their own definition of emotional difficulty when answering my questions. According to the findings from Phase two, some mothers differentiated between different types of mental illness in terms of stigmatisation and the need to receive different types of professional help. Therefore, it would be fruitful to specify types of emotional difficulty in future research for reasons of clarity and for exploring whether there are different approaches to different types of problems in Taiwanese context.

8.1.4 Considerations of individual differences

Through this study, we can start to understand how the Chinese cultural background may impact on an individual's view of professional psychological help. Nonetheless, the individual differences of the extent an individual abides by traditional cultural values and one's attitudes towards seeking professional psychological help are also evident. This signifies the necessity to explore further how individuals within similar cultural contexts can differ in how their cultural values shape their thoughts and behaviours. That is to say, although this thesis has taken within cultural differences into consideration by measuring the extent of adherence to traditional Chinese cultural values for each individual, the factors influencing individual differences in the process were not clearly incorporated in the current study, and should be considered as a direction of future research. Investigating the

potential individual factors, such as different traits and dispositional factors, and contextual factors, which also influence the effect cultural values have on an individual, are necessary for understanding the phenomena in question.

In other words, expanding and modifying the proposed mechanism in future work is recommended. Only mediation effects were considered in the conceptual mechanism proposed in the current study. Moderation effects, however, may result in individual differences in the relationship between these predictors and individuals' attitudes towards seeking professional psychological help, and is worth investigating. For example, can an individual of a multi-cultural background resist the negative effect of Chinese values on their willingness to seek psychotherapy or counselling? Or can personality traits, like openness, alter the mechanisms of the development of attitudes towards professional psychological help in a Chinese cultural context? Answers to the above questions can result in an even more holistic understanding of the research problem.

Pragmatically speaking, in the hope of promoting the utilisation of professional psychological help through the optimal design of psycho-education in the future, one needs to choose the right content for the right audience to achieve the most efficient results.

8.1.5 Consideration of adopting a transactional view of the mechanism

As a cross-sectional design study, this project is limited to approaching the phenomenon from one point. The overall findings suggested transitioning values and attitudes among Taiwanese mothers. This means that the relationship between cultural values and attitudes towards seeking professional psychological help is dynamic and may be at a stage of development and acculturation. The current cross-sectional design, however, limited its validation. As cultural values and attitudes may be fluctuating in Taiwanese society, single-point quantitative data collection may not be the most appropriate in understanding the dynamic relationship between the two. Therefore, longitudinal design or the concept of cultural adaptation may be worth exploring in future research. The consideration of "time" or "change" as transactional factors appears suitable for the Taiwanese cultural context, which

is constantly being exposed to other cultures. All mechanisms may, therefore, be more optimally considered as dynamic trajectories. This mode of thinking is recommended in future research to capture more fully the process of transition than just parsimoniously adopting the idea of age or generational differences.

8.1.6 Adding final behavioural outcome variables to represent actual utilisation of professional psychological help

Willingness or actual behaviours of utilising professional psychological help were not systematically examined in the current study. Although research has suggested the clear association between attitudes towards mental health services and the willingness and actual utilisation of mental health services in the past (Deane & Chamberlain, 1994; Chang, 2008; Chang, 2014), this behavioural outcome is worth examining for the purposes of developing a more complete model in the future. This also extends to whether mothers' attitudes towards seeking professional psychological help can really impact on whether their children ultimately receive professional psychological help. Concerning this, a child's cohort may need to be differentiated, as mothers might consider different factors in terms of their offspring receiving professional psychological help at different stages of their development.

8.1.7 Further modification and development of a more holistic model

As being in an initial stage of attempting at unveiling the underlying mechanisms of the development of attitudes towards seeking professional psychological help in a Chinese cultural context, one of the limitations of the current study is that it has incorporated only limited factors. Although this project has contributed to the formation of a modified conceptual framework for investigating the underlying mechanisms between Chinese cultural values and attitudes towards seeking professional psychological help among Taiwanese mothers in the future, it is still in need of further improvement

to achieve a more accurate conceptualisation of a theory investigating professional psychological help-seeking in the Chinese cultural context. The examination of the proposed mechanisms in more diverse samples is necessary. An even larger sample to test an improved model should be adopted in the future to clarify the mechanisms underlying the utilisation of professional psychological help. In the meantime, more focused interviews with participants with different characteristics should be designed to expand our understanding of the key constructs of the model, and also to capture possible contextual and individual differences.

8.2 Practical contributions

Integrated analyses of these multiple data sources in the current project extended the understanding of the mechanisms underlying the development of attitudes towards seeking professional psychological help among Taiwanese mothers, and potentially contributed to raising awareness and identifying possible points of entry for promoting the utilisation of such services for both practitioners on the front line and policy makers.

The findings underline the possibility of shifting doubtful or more negative views of seeking professional psychological help in the near future. The prospect of change in the attitudes towards professional psychological help has been demonstrated in past research (Chen & Lewis, 2011; Han, Chen, Hwang & Wei, 2006; Yang et al., 2014). As identified in this thesis, the numerous cultural, knowledge and practical barriers to seeking professional psychological help among Taiwanese mothers, allow practitioners and researchers to target more specific aspects of psycho-education or advertisement, which may alleviate doubts and elevate the willingness of utilisation of professional psychological help.

The overall findings of this thesis can inspire specific directions for future work in psycho-education. For example, as shown in the interviews, fear of damaging relationships or having negative impacts on others often hindered the expression or free exploration of the mothers' emotions. Making them aware that in a psychotherapeutic relationship, emotion expression can be unconditional and,

thus, safe may lead to eradicating suspicion against psychology professionals.

In addition to the general public, psycho-education can also be implemented among mental health practitioners. That is to say, this thesis provided directions to increase awareness of how to implement professional psychological help in a Chinese cultural context, such as Taiwan. For example, it might be worth for practitioners to rethink the ideas of “privacy” and “confidentiality” in the Chinese cultural context in view of the closely knit Taiwanese social structure. In such a context, an individual’s feeling of safety in seeking professional psychological help may be decreased. How the necessary sense of security can be enhanced and assured is worth contemplating. Providing more diverse ways to deliver professional help may be a possible solution. For example, new forms of professional psychological help, such as online therapy designed carefully and securely, may elevate utilisation rates. Other than this, as confusion between different mental health professionals emerged as prevalent from my interviews with Taiwanese mothers, it is important to consider how to cement the understanding that different kinds of professionals exist among mental health providers and, also, to reinforce coordination between them on both an individual and a policy-making level.

Further on a policy-making level, it is imperative for the government to pay attention to the importance of psychological well-being, and find ways to improve accessibility to professional psychological help or mental health knowledge. Also, by adding more benefits regarding psychological help to health care provision might reduce the cost concern for many individuals of limited means. Finally, as the findings in the current project suggest, it is worth being conscious when importing systems or policies from other countries with different cultural origins, as adaptation will be necessary and inevitable.

8.3 Reflections on my learning through the research process

The current research project has contributed to my personal learning and development in several ways. First of all, the overall findings of this thesis have deepened and enriched my understanding of the relationship between Chinese cultural values and attitudes towards seeking

professional psychological help, and the phenomenon of under-utilisation of such help in Taiwanese society. These findings made me think about the underlying mechanisms, rather than staying at the surface of the under-utilisation phenomenon. The modified conceptual framework developed through my findings will continue to act as a solid foundation for me to build future inquiries. Second, the use of the mixed-methods design to approach a research problem in a fruitful way has strengthened my resolve to become a more versatile researcher. Finally, the most important personal learning curve in this process has been the awareness of my own development in terms of reflexivity, skills, cultural awareness, understanding and sensitivity. All these are bolstered by the new insights uncovered in this thesis about indigenous and cross-cultural issues, based on the review of the relevant literature, conversations with Taiwanese mothers, and the subsequent analyses along my journey.

I have also been aware of my developing reflexivity throughout the process of this project. At the beginning, I was so determined to identify the research problem and a possible solution that I found myself biased and focusing on the negative impacts and lack of consideration of those factors that may potentially contribute positive effects. As I worked towards reflexivity along carrying out this project, I gradually accumulated knowledge and observations that lead to the development of seeing facilitator and not just obstacles. I expect myself to keep developing and practice reflexivity in the future to prevent bias in the future. My interviewing skills are another direction of development. Although I was trained in interview skills, such as attentive listening, I still find myself wanting to do more than receive information from my participants, especially when they discuss emotional distress. I started to think that research should not only be about getting information from the participants, but that sometimes it can be about giving, sharing or even helping through, for example, an empathetic response at a given moment, and not just through delayed research advancement. Reflection on my interviews with Taiwanese mothers encourages me to work towards developing more conversational skills that can increase participants' feeling of being genuinely empathised with.

Next, I have reflected on my assumption that professional psychological help is potentially beneficial to one's psychological well-being based on my own background experience and past research. The findings of the current study demonstrated the complex thinking involved in considering

professional psychological help among Taiwanese mothers in the Chinese cultural context. This extends to the consideration that the avocation and practice of professional psychological help in Taiwan need to be undertaken with cultural considerations in mind, flagging the importance of culturally sensitive practices, such as the development of multi-cultural counselling competency among professional psychological help providers in Taiwan. Past research has demonstrated the potential benefits and the necessity of advocating such services in Taiwan for the sake of people's psychological well-being despite the fact that these theoretical principles are mainly developed from a euro-centric perspective (Benish et al., 2011; Liu, 2006). My findings suggest that psychotherapy and counselling are apparently not the primary resources that Taiwanese mothers consider when facing psychological distress. Sharing emotional distress with loved ones seems to be a primary option for many interviewed Taiwanese mothers. When these primary or typically first-sought resources, however, are not available or suitable, professional psychological help is then a possibly useful resource that can come into the picture. Also, very often in my interviews, Taiwanese mothers showed their spontaneous interest in professional psychological help as an option now and in the past, but at the same time were hesitant or reluctant about using it due to the obstacles identified in the thesis. Given the above, I would emphasise once again that professional psychological help may not be the only and ultimate solution in dealing with emotional difficulty for individuals in Taiwan. From the findings of the current project, however, it seems that promoting it to a level where one can feel at ease with their intention or behaviours of seeking professional psychological help, whenever necessary, is a goal worth striving for.

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Appendices

Appendix A: Mandarin invitation letter to potential recruitment resources

敬啟者：

您好，我的名字叫張均后，目前為英國劍橋大學博士班研究生，正在進行我的博士班研究：『台灣母親對心理健康相關議題之看法調查研究』。本研究之目的為理解臺灣年輕一代母親對於心理健康相關議題之態度，並進一步探索這些態度之形成機制，希望能協助未來相關議題的學術研究，以及實務工作。

在此謝謝您願意考慮幫忙我募集參與研究的受試者，以此為目標，本研究設計希望能在此階段募集到大約 600 名年輕一代的台灣媽媽，幫忙我填寫需時約 20-30 分鐘的網路線上問卷，完成填答後會發送一份小禮物（100 元統一超商電子禮卷）回饋給參與的媽媽。此次研究由劍橋大學 Dr. Carol Holliday 與 Ruth Kershner 指導，並且經過審查委員之審核與批准，研究過程中亦將嚴守相關研究倫理，請您放心。

此次的受試者募集，主要想要找的族群為：有未滿 18 歲孩童的台灣媽媽。為了收集到這多達 600 名台灣年輕媽媽的資料，您的支持與幫忙對我來說極其重要，非常感謝您的熱心相助。如果您願意幫忙我的研究，將會需要您慷慨的幫忙以下幾件事：

1. 以您方便的方式在您單位的佈告欄張貼本研究的募集邀請廣告
2. 麻煩您在有機會時，邀請您能接觸到的有 18 歲以下孩童的台灣媽媽參加本線上問卷調查
3. 以附上的表格幫忙請願意填寫線上問卷之符合募集條件的台灣媽媽登記其線上聯絡方式（因本次研究的形式為網路化的線上問卷，以方便媽媽們於任何時間或地點進行填答，故將以線上，如電子郵件，Line 或 Fb，直接發送問卷的連結為主，倘若您遇到想參加但不方便在線上回復問卷的媽媽，也麻煩您幫我在同樣的表格留下他偏好的聯絡方式）。

此次的調查研究所得資料將完全為學術研究分析使用，並且承諾堅守保護參與者匿名隱私的原則。若您對本研究有任何的問題，歡迎您隨時以下面提供的聯絡資訊與我聯繫。

再次感謝您撥冗閱讀此邀請說明，衷心期待您的幫忙與支持 ☺

敬祈：

福慧安康

張均后 敬上

研究者：張均后
英國劍橋大學教育系博士候選人
聯絡電話：0905-070354
聯絡電子郵件：chc55@cam.ac.uk
聯絡地址：Faculty of Education,
University of Cambridge,
184 Hills Road, Cambridge
CB2 8PQ, UK

Appendix B: English (translated) invitation letter to potential recruitment resources

To whom it may concern:

My name is Chun-Hou, Chang. I am currently a PhD student at the University of Cambridge. Thank you for considering assisting the recruitment of my research project.

This study aims to provide a clearer view of the underlying mechanisms of the attitudes towards adopting professional psychological help among Taiwanese mothers. My project has been designed to primarily look into these attitudes' relationships to the uniqueness of Chinese cultural values, especially its influence on views regarding emotion and mental difficulty. The main criterion of my participants is that they need to be Taiwanese mothers with children no older than 18 years old. At this stage of my research I will require around 600 Taiwanese mothers to help me fill out a 30-minute online survey. This survey is the first phase of my project and the second phase that follows is an individual face-to face interview with 10 mothers. The 10 mothers in the second phase will be randomly selected among those who agree to also participate in phase two in the first 600 mothers. In order to recruit as many as 600 Taiwanese mothers, your support and help is highly necessary and greatly valued. If you agree to support my project, please kindly help me with the three things listed below.

4. Post the recruitment ads on your (any form) bulletin board in any way that suits you.
5. Disseminate the recruitment information to any Taiwanese mothers with children under the age 18 that you have access to
6. Register the email address of anyone that might be interested in participating for me to collect (Since this is a online-survey, email address will be preferable because it takes only a link to participate. However if there is any mothers who is interested in participating but have no internet or email access, I will gladly send them a hard copy of the survey. Therefore telephone number or address are also acceptable in such situations)

The project is run by solely by me as a PhD student at the University of Cambridge, as part of my doctoral thesis. All information collected in this project will be used only for academic purpose and will be protected under the principle of confidentiality. The project is under the supervision of Dr. Carol Holliday and Ruth Kershner, and is reviewed and approved by the examination board. If you have any questions regarding this study, please feel free to contact me using the information listed below.

Once again, thank you for your time. Your help and support are crucial and will be highly appreciated.

Sincerely,

(Sign)

PhD candidate at the Faculty of Education,
University of Cambridge

Chun-Hou Chang

Contact number: 0905-070354

Email: chc55@cam.ac.uk

Contact address: Faculty of Education,
University of Cambridge,
184 Hills Road, Cambridge
CB2 8PQ, UK

Appendix C: Mandarin (original) invitation letter to potential participants

各位親愛的媽媽：

您好，我是張均后，目前是英國劍橋大學教育學系的博士班研究生，想要在此誠摯地邀請有 18 歲以下孩童的媽咪參與一個線上問卷調查研究。此次研究由英國劍橋大學 Dr. Carol Holliday 與 Ruth Kershner 指導，並且經過教育系審查委員之審核與批准，研究過程中亦將嚴守相關研究倫理，請您放心。

本研究主要想要透過線上的問卷調查方式來瞭解台灣現今社會中媽媽對心理健康相關議題的看法，並期待由此初步的瞭解來協助未來推廣及促進台灣社會中父母及孩童的心理健康。

本研究的進行方式將由我依您方便的網路聯絡方式，傳送本次研究的網路線上問卷的連結給您，您可以在任何方便的時間或地點進行填答，完成整份問卷共需大約 20 - 30 分鐘，為了感謝您的參與，完成填答後將寄送一份小禮物回饋予您（100 元統一超商電子禮卷）。問卷的主要內容是請您以回答選擇題的方式來了解您對心理健康相關議題的意見和看法。您的所有填答都將匿名保密，資料也僅提供學術研究分析之用。您的參與將會帶給本研究相當重要的協助，非常期待您的加入，謝謝您！

若您有興趣協助本研究，您可以選用以下的聯絡方式與我聯絡，或在提供的表格留下您方便的聯絡方式，或是直接使用問卷連結，謝謝您！

問卷連結：：https://cambridge.eu.qualtrics.com/SE/?SID=SV_ewzxgWM1DMfypAV

電子郵件：chc55@cam.ac.uk

行動電話：0905-070354

敬祈：

福慧安康

張均后 敬上

研究者：張均后
英國劍橋大學教育系博士候選人
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University of Cambridge,
184 Hills Road, Cambridge
CB2 8PQ, UK

Appendix D: English (translated) invitation letter to potential participants

Dear Moms:

Hello, my name is Chun-Hou. I am PhD student at the Faculty of Education in the University of Cambridge. I would like to sincerely invite moms with children under the age of 18 to participate in an online survey. The study was supervised by Dr. Carol Holliday and Ruth Kershner of the University of Cambridge, UK, and reviewed and approved by the Review Board at the Faculty of Education. Related research ethics will also be strictly adhered to during the research process. Please be assured.

This study mainly wants to understand the views of mothers on mental health related issues in Taiwan's current society through online questionnaires, and hopes that this preliminary understanding will help to promote the mental health of parents and children in Taiwan.

This study will be conducted basing on network contact of your convenience. I will send you a link to the online questionnaire of this study through your preferred contact method. You can answer it at any convenient time or place. The completion of the survey will take about 20 - 30 minutes. In order to thank you for your participation, after the completion of the survey, I will send a small gift to you (100 New Taiwanese dollars 7-11 e-coupon). The main content of the survey is to ask you to respond to multiple-choice questions in order to understand your opinions and views on mental health related issues. All your answers will be kept anonymous and the data will only be used for academic research analysis. Your participation will be a significant help to this study. I look forward to your joining, thank you!

If you are interested in participating in this study, please use the following contact methods to contact me, or leave a convenient contact in the form provided, or use the below survey link directly. Thank you!

Survey link: https://cambridge.eu.qualtrics.com/SE/?SID=SV_ewzxgWM1DMfypAV

Email: chc55@cam.ac.uk

Mobile number: 0905-070354

Sincerely,

(Sign)

PhD candidate at the Faculty of Education,
University of Cambridge
Chun-Hou Chang

Contact number: 0905-070354

Email: chc55@cam.ac.uk

Contact address: Faculty of Education,
University of Cambridge,
184 Hills Road, Cambridge
CB2 8PQ, UK

Appendix E: Mandarin (original) Phase one participant information sheet and consent form



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CAMBRIDGE**

Faculty of Education

研究說明暨參與研究同意書

親愛的媽媽，您好

首先，誠摯的感謝您熱心參與本次研究。本次研究之主要目的在於以線上問卷調查的方式，由您的角度來了解您對心理健康相關議題的看法。此次的研究結果將能貢獻於幫助我們了解台灣媽媽對相關議題的態度和想法及其發展，並期待藉由此次的探究，幫助往後相關研究議題，以及進一步在未來協助促進台灣社會孩童的心理健康與發展。

此次的問卷調查為不記名的線上問卷調查，完成整份問卷需要麻煩您撥出大約二十至三十分鐘的時間。過程只需您提供簡單的基本資訊，或是依照题目的指示，根據您自身的感受，以直覺在提供的選項中點選最合適的數字。為了感謝您的參與，問卷調查的最後會向您詢問您偏好的聯絡方式，並依您提供的資訊寄送新台幣 100 元統一超商購物金電子序號乙份。

本研究是由英國劍橋大學教育學系博士候選人張均后，在指導教授 Dr. Carol Holliday 與 Ruth Kershner 共同指導下所進行，並承諾堅守相關研究倫理。本研究相關倫理經由英國劍橋大學教育系倫理委員會審查通過，以確保您的權利。

基於我們對於您個人權益的尊重，本研究對您有以下承諾：

- ※您有權隨時停止參與本研究，或停止作答。
- ※您有權要回您的資料，並且撤銷被納入分析。
- ※若您有需要，您有權在本研究結束後知道研究結果。
- ※如有任何疑問，您可隨時經由參與者聯中所附之聯絡方式與研究人員進行聯絡。

本研究之結果，僅供學術使用，將不做其他用途；本研究調查中的所有問題都沒有對錯或好壞的判斷，請您自由地按照您真實的直覺想法來回答，您的所有作答與意見都是最珍貴的資訊。此次研究的所有過程中，您的所有資料將被匿名保密，這表示所有指稱您身份的資訊，如姓名或確切的聯絡方式等資料即使在分析或未來結果報告中都被保密，請您放心，謝謝您的合作！

如您同意參與本研究，請於同意參與研究的選項打勾並在簽名處填入您的姓名。

☐ 我已詳閱以上內容並同意參與本研究

簽名: _____

若無疑問，請按下一頁進入正式問卷作答。
再次謝謝您的時間和貢獻。

研究者：張均后
英國劍橋大學教育系博士候選人
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University of Cambridge,
184 Hills Road, Cambridge
CB2 8PQ, UK
研究者簽名：張均后

Appendix F: English (translated) Phase one participant information sheet and consent form



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Information sheet and Consent form

Greetings to dear participants:

First of all, I sincerely appreciate your participation in the current study. The current phase aims at understanding your point of views and understanding about psychological health related topics through online questionnaires survey. I expect that this investigation can contribute to our understanding of what the attitudes and thoughts are and how they developed. This will help us in later stage of the research, and will benefit future promotion, and advancement of children's psychological well-being in the Taiwanese society.

This survey is an anonymous online survey. It takes about 30 minutes to complete. The process only requires you to provide simple and basic information, or base on your own feelings, intuitively select the most appropriate number among the options provided according to the instructions of the topic. In order to thank you for your participation, at the end of the survey you will be asked for your preferred contact information. A NT\$ 100 7-11 E-voucher will be sent to you based on the method you provided.

This project is being supervised by Carol Holliday and Ruth Kershner and is adhered to the relevant ethical frameworks for research. Your ethical rights are ensured through the examination by ethical review board of the faculty of education in the University of Cambridge. Based on research ethics and our respect for your personal rights, present study promises the followings:

- ※ You have the right to withdrawal from the study or cease answering to any questions at any point in the research.
- ※ You have the right to retrieve your data.
- ※ You have the right to know about the results if you want.
- ※ If you have any doubts or questions, you can contact the researcher through the contact information we provide here anytime.

The results of this study will only be used in academic purpose. Your responses and opinions during the whole research process will be highly valued. There is no right or wrong answers to the questions posed in the survey, therefore please choose your answers according to your experience freely.

Confidentiality is assured through maintaining anonymity of all of your data. This means that we omit any identifying details such as name, precise contact details etc. Thank you very much for your cooperation.

If you agree to participate in this study, please tick the box below and sign.

☐ **I already read through all of the material and I agree to participate in this study.**

Signature: _____

If you have no further questions, please click on the next page to enter the formal questionnaire.

Thank you again for your time and contribution.

Graduate student at the Faculty of Education,

University of Cambridge

Chun-Hou Chang

Contact number: 0905-070354

Email: chc55@cam.ac.uk

Contact address: Faculty of Education,

University of Cambridge,

184 Hills Road, Cambridge

CB2 8PQ, UK

Researcher Signature : _____

Appendix G: Formal Phase one Mandarin (original) online survey

2018/7/12

Qualtrics Survey Software

Information page

研究說明暨參與研究同意書

親愛的媽媽，您好

首先，誠摯的感謝您熱心參與本次研究。本次研究之主要目的在於以線上問卷調查的方式，來了解您對心理健康相關議題的看法。此次的研究結果將能貢獻於幫助我們了解台灣媽媽對相關議題的態度和想法及其發展。並期待藉由此次的探究，幫助往後相關研究議題，以及進一步在未來協助促進台灣社會孩童的心理健康與發展。

此次的問卷調查採不記名的方式，完成整份問卷需要麻煩您撥出大約三十分鐘的時間。過程只需您提供簡單的基本資訊，或是依照题目的指示，根據您自身的感受，以直覺在提供的選項中點選最合適的數字。為了感謝您的參與，問卷調查的最後會向您詢問您偏好的聯絡方式，並依您提供的資訊寄送新台幣100元統一超商購物金電子序號乙份。

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基於我們對於您個人權益的尊重，本研究對您有以下承諾：

※您有權隨時停止參與本研究，或停止作答。

※您有權要回您的資料，並且撤銷被納入分析。

※若您有需要，您有權在本研究結束後知道研究結果。

※如有任何疑問，您可隨時經由下方所附之聯絡方式與研究人員進行聯絡。

本研究之結果，僅供學術使用，將不做其他用途；本研究調查中的所有問題都沒有對錯或好壞的判斷，請您自由地按照您真實的直覺想法來回答，您的所有作答與意見都是最珍貴的資訊。此次研究的所有過程中，您的所有資料將被匿名保密，這表示所有指稱您身份的資訊，如姓名或確切的聯絡方式等資料即使在分析或未來結果報告中都被保密，請您放心，謝謝您的合作！

如您同意參與本研究，請點選同意參與研究的選項並在下頁簽名處填入您的姓名（此僅為確認您同意參加研究，您的資料依然會被確保匿名保密）。

❖ 請注意，麻煩您務必在下列選項中點選，若您無選擇任何選項，或是您選擇不適合參與研究，測驗都將在您點選下一頁後直接結束

研究者：張均后
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聯絡地址：Faculty of Education,
University of Cambridge,

- ☐ 我已詳閱以上內容並同意參與本研究
- ☐ 閱讀介紹後發現我不適合參與此研究

簽名處（此僅為確認您同意參加研究，您的後續填答依然採不記名，並確保匿名保密）

基本介紹及基本資料

親愛的媽媽您好！

再次感謝您願意撥冗填寫本問卷！此為不記名的線上問卷調查，完成整份問卷大概需要您三十分鐘左右的時間。過程只需您提供簡單的基本資訊，或是依照題目的指示，根據您自身的感受，以直覺在提供的選項中點選最合適的數字。

此份線上問卷共包括四大部分，問卷中的問題以了解您對心理健康相關議題的看法為目的，題目完全沒有對與錯，請您儘量依照您真實的直覺作答。在請您開始填寫問卷前，在此再次強調，您的填答將嚴格保密，以完全匿名的方式，純粹為學術研究使用，不會與其他分享，請您放心填答，協助我們進行研究。

非常謝謝您願意協助！現在請您往下開始填寫基本資料：)

您的國籍

請問您是否有在海外生活過？

- ☐ 曾長期生活在海外超過三年的時間
- ☐ 曾在海外生活過一年以上，不到三年的時間
- ☐ 大約是六個月以上，不到一年的時間
- ☐ 都是不超過六個月的經驗
- ☐ 目前尚未有到海外的機會

您的年齡

您的最高學歷

- ☐ 國中以下
- ☐ 高中職
- ☐ 大專院校/學士
- ☐ 碩士
- ☐ 博士

您的居住縣市

您的職業

- ☐ 家管
- ☐ 勞工
- ☐ 軍人
- ☐ 服務業
- ☐ 自由業
- ☐ 農漁業
- ☐ 商業人士
- ☐ 公務人員
- ☐ 教育相關
- ☐ 醫療相關人員
- ☐ 專業技術人員
- ☐ 其他

您有幾名孩子？

最小的孩子的年齡是幾歲（或幾個月）呢？

歲（年）

月

最大的孩子的年齡是幾歲（或幾個月）呢？（若只有一位孩子則請您跳過此題）

歲（年）

月

第一部分：心理專業求助態度

第一部分：

第一部分將嘗試了解您對於**心理專業相關服務**的看法。而心理專業人員一詞則指受過心理相關專業訓練，且對心理困擾的改善可能有所幫助的人（如臨床心理師、諮商心理師、心理治療師等）。

下列題目請您就**您自己主觀的直覺**來選擇填答即可，在每項題目中選擇（0）完全不同意、（1）有點不同意、（2）沒有意見、（3）有點同意、（4）完全同意：

1. 某些特定問題不應該在家庭以外的地方討論。

- ☐ （0）完全不同意
- ☐ （1）有點不同意
- ☐ （2）沒有意見
- ☐ （3）有點同意
- ☐ （4）完全同意

2. 當我需要尋求專業人員來處理心理困擾時，我知道從哪邊可以獲得協助。

- ☐ （0）完全不同意
- ☐ （1）有點不同意
- ☐ （2）沒有意見
- ☐ （3）有點同意
- ☐ （4）完全同意

3. 我不希望我的親人（父母、兄弟姐妹等人）知道我有心理困擾。

- ☐ （0）完全不同意
- ☐ （1）有點不同意

- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

4. 專心工作是避免個人煩惱和困擾的好方法。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

5. 如果我的好朋友有心理困擾而向我徵詢意見時，我會建議他去找心理專業人員。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

6. 有心理困擾會令人感到羞恥。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

7. 最好不要了解自己所有的事情。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

8. 如果我正面臨人生中最嚴重的心理困擾，我認為心理諮商可幫我減輕困擾。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

9. 人們應該自己處理自己個人的問題，尋求心理專業人員的協助應該是最後的選擇。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

10. 如果我遇到心理困擾時，只要我願意便可得到心理專業人員的幫助。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

11. 當我生命中最重要的人發現我有心理困擾時，他們可能無法像以前那樣看重我。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

12. 心理困擾就像許多事情一樣，不理會它也能解決。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐

- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

13. 對我而言，花時間去找心理專業人員處理心理困擾是相當自然的。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

14. 有些我生命中的事情，我不會跟任何人討論。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

15. 若我長期處於煩惱或情緒低落時，我會希望尋求心理專業人員的協助。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

16. 如果我的生活圈中有人發現我去尋找心理專業人員的協助，我會感到不安。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

17. 被診斷出有精神疾病是人生中的一個污點。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

18. 不願意接受心理專業人員的協助，而自己解決其衝突與恐懼是值得被肯定的。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

19. 當我發現自己有心理困擾時，我第一時間會尋求專業的心理輔導。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

20. 因為一些人的想法，會讓我尋求心理專業人員時感到不安。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

21. 能克服自我的心理困擾，並且很少需要心理專業人員的幫助，才是一個堅強的人。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐

- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

22. 誰能幫助我或家人解決問題，我便會向他透露我自己的事。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

23. 如果我要接受心理輔導，我不覺得有需要隱瞞這件事。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

24. 如果鄰居看見我去接受心理輔導，會使我感到尷尬。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

25. 即使自己知道可能有問題或困擾，但也不要去想這麼多。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 沒有意見
- ☐ (3) 有點同意
- ☐ (4) 完全同意

26. 您曾經有尋求過心理專業協助的經驗嗎？

- ☐ 有
- ☐ 沒有

第二部分：情緒表達

第二部分：情緒經驗

(一)

請判斷以下各敘述與您生活中的真實情況是否相符，並在每項敘述下點選出最合適的數字：

(1) 表示“完全不符合”，(2) 表示“很不符合”，(3) 表示“不太符合”，(4) 表示“不確定”，(5) 表示“比較符合”，(6) 表示“很符合”，(7) 表示“完全符合”。

1. 每當我覺得愉快時，人們總能輕易察覺到。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

2. 我有時在看悲傷電影的時候會哭。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

3. 人們往往不知道我的內心感受。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐

- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

4. 當聽到有趣的笑話時，我會放聲大笑。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

5. 對我而言，隱藏內心的恐懼和害怕很難。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

6. 當我感到高興時，我會表現出來。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

7. 在面對情緒化的場面時，我的身體也會有強烈的反應。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

8. 請在這題點選 (5) 比較符合。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

9. 我覺得與其動怒發火不如克制自己。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

10. 無論我有多麼緊張不安，我都試圖保持表面的冷靜。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

11. 我是個擅於表達自己情緒的人。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

12. 我感情很豐富。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

13. 有時儘管我想掩飾自己的感受，也做不到。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

14. 每當我心情不好時，人們總能很輕易地看出我的感受。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定

- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

15. 有時即使我想停止哭泣也無法做到。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

16. 我的情緒很強烈。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

17. 我的感受都寫在了臉上。

- ☐ (1) 完全不符合
- ☐ (2) 很不符合
- ☐ (3) 不太符合
- ☐ (4) 不確定
- ☐ (5) 比較符合
- ☐ (6) 很符合
- ☐ (7) 完全符合

第二部分：情緒調節

(二)

以下問題將承續先前的題目，亦是關於您的情緒，特別是您如何管理您的情緒。
請依照您實際的狀況，在（1）～（4）的數字中選擇一個您同意的程度。

1. 當我想要感覺更多的正向情緒時（像是高興或快樂），我會改變我的想法。

- ☐ （1）非常不同意
- ☐ （2）不同意
- ☐ （3）同意
- ☐ （4）非常同意

2. 我獨自承受自己的情緒。

- ☐ （1）非常不同意
- ☐ （2）不同意
- ☐ （3）同意
- ☐ （4）非常同意

3. 當我想要感覺較少的負向情緒時（像是悲傷或生氣），我會改變我的想法。

- ☐ （1）非常不同意
- ☐ （2）不同意
- ☐ （3）同意
- ☐ （4）非常同意

4. 當我感受到正向情緒時，我會小心謹慎地不把這些正向情緒表達出來。

- ☐ （1）非常不同意
- ☐ （2）不同意
- ☐ （3）同意
- ☐ （4）非常同意

5. 當我面臨一個有壓力的情境時，我會思考可以幫助我保持冷靜的方式。

- ☐ （1）非常不同意
- ☐ （2）不同意
- ☐ （3）同意
- ☐ （4）非常同意

6. 我控制自己的情緒而不表達出來。

- ☐ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

7. 當我想要感覺更多的正向情緒時，我會改變對當時情境的看法。

- ☐ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

8. 身處壓力情境時，我會想辦法讓自己沉著應對。

- ☐ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

9. 當我感受到負向情緒時，我確保不將他們表現出來。

- ☐ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

10. 當我想要感覺較少的負向情緒時，我會改變對當時情境的看法。

- ☐ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

11. 我藉由改變對當時情境的看法來控制我的情緒。

- ☒ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

12. 面對壓力時，我會想出一些方法讓我可以冷靜地處理。

- ☐ (1) 非常不同意
- ☐ (2) 不同意
- ☐ (3) 同意
- ☐ (4) 非常同意

第二部分：心情狀態

(三)

下列的問題是為了了解您的心情狀況，請您仔細回想在最近一週中，這些問題使您感到困擾或苦惱的程度，然後選擇一個您認為最能代表您感覺的答案。

1. 感覺緊張不安

- ☐ (0) 完全沒有
- ☐ (1) 輕微
- ☐ (2) 中等程度
- ☐ (3) 厲害
- ☐ (4) 非常厲害

2. 覺得容易苦惱或動怒

- ☐ (0) 完全沒有
- ☐ (1) 輕微
- ☐ (2) 中等程度
- ☐ (3) 厲害
- ☐ (4) 非常厲害

3. 感覺憂鬱、心情低落

- ☐ (0) 完全沒有
- ☐ (1) 輕微

- ☐ (2) 中等程度
- ☐ (3) 厲害
- ☐ (4) 非常厲害

4. 覺得比不上別人

- ☐ (0) 完全沒有
- ☐ (1) 輕微
- ☐ (2) 中等程度
- ☐ (3) 厲害
- ☐ (4) 非常厲害

5. 睡眠困難，譬如難以入睡、易醒或早醒

- ☐ (0) 完全沒有
- ☐ (1) 輕微
- ☐ (2) 中等程度
- ☐ (3) 厲害
- ☐ (4) 非常厲害

第三部分：傳統觀與現代觀

第三部分：

(一)

此部分將詢問您對一些常見觀念的看法，請您依照您直覺回答即可。
請仔細閱讀下面的的每一語句，然後點選一個適當的選項，以代表您的意見。

1. 男女在論及婚嫁之前，必須先合八字，以免相沖相剋。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

2. 父母所敬愛的人，子女也應敬愛。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

3. 夫妻意見不同時，妻子應該順從丈夫。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

4. 委託養老院供養自己的父母，是不孝的行為。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

5. 只求自保、少管閒事，是立身處世的重要原則。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

6. 工作的酬勞應以年資為優先考慮，個人的能力還在其次。

- ☐ (1) 非常不同意

- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

7. 如果因事爭執不下，應請輩份最高的人主持公道。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

8. 男人是一家之主，家中的事應由丈夫作主。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

9. 好好侍奉公婆，是媳婦應盡的責任。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

10. 富貴貧賤，成敗得失，都是命中註定的。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意

- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

11. 這題麻煩您選擇 (3) 有點不同意。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

12. 年輕人對男女間的性知識知道的越多，就越容易出毛病。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

13. 服從權威與尊敬長上，是兒童所應學習的美德。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

14. 無論怎麼說，女人還是不參加政治活動的好。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意

- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

15. 在長輩面前，小孩子應舉止端莊，恭恭敬敬。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

16. 遇到有財有勢的人，無論誰是誰非，最好避免與他們爭辯。

- ☐ (1) 非常不同意
- ☐ (2) 相當不同意
- ☐ (3) 有點不同意
- ☐ (4) 有點同意
- ☐ (5) 相當同意
- ☐ (6) 非常同意

第三部分：中庸思維

(二)

此部分想了解您對一些待人處世觀念的看法。此部分題目將需要您做兩個階段的回答，首先，每一題會出現兩個敘述句，請針對每一題所列出的兩個描述，點選出一個您比較同意的選項。接下來，在您選出較同意的敘述後，請在下方評量您同意您所選擇的敘述的程度，點選(1)～

(7)，(1) 表示非常不同意，(7) 表示非常同意：

1. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 與人相處，不能吃虧，否則別人會得寸進尺。
- ☐ 與人相處，吃點眼前虧，將來對自己可能有好處。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

2. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 處理事情，要當機立斷，免得節外生枝。
- ☐ 事情發生時不要急於採取行動，先靜觀一下事態的發展再說。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

3. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 做事如不採取強硬態度，別人便會看不起你。
- ☐ 任何事做得過火，通常會適得其反。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

4. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 一件事總有好的和壞的兩方面，就看你怎麼看了。
- ☐ 不管你怎麼看，每件事情都可以總結為「好的」或「不好的」。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

5. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 與人相處，只做到「合理」是不夠的，還要「合情」才恰當。
- ☐ 與人相處依理行事即可，不必兼顧人情。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

6. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 人為爭一口氣，有時候得不怕得罪人。
- ☐ 為了與周圍的人和睦共處，有時候得忍一口氣。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

7. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 一個人就算運氣好，也要看你能否抓住機會。
- ☐ 一個人要是運氣好，自己不用做什麼，機會也會自動找上門。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

8. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 不管自己多麼有理，「放人一馬」總是好的。
- ☐ 有理就要據理力爭。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

9. 請從下列兩個敘述中，選出一個您較為同意的敘述。

- ☐ 做事總要以維持大局為重，不要只考慮到自己。
- ☐ 做事總是要顧全大局的話，往往只是委曲求全。

請評量您認為您對上面所選的敘述同意的程度

- ☐ (1) 非常不同意
- ☐ (2)
- ☐ (3)
- ☐ (4)
- ☐ (5)
- ☐ (6)
- ☐ (7) 非常同意

第四部分：對精神疾病的看法

第四部分：

下面是有關人們對精神疾病和精神疾病患者可能會有一些看法，請您根據自己個人的真實感受與直覺，來判斷對每種看法同意的程度，並點選相應的同意程度。

1. 精神病患者可以成為信賴的朋友。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

2. 讓精神病人自由地生活對其他人會很危險。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

3. 精神病院的主要責任是防止精神病人發生暴力/傷害他人。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

4. 如果被人知道我家裡有精神病人，我會感到很丟人。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

5. 我不願意和精神病人住在一起。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

6. 對精神病人來說，建立一個像糖尿病患者或肝病患者的自助團體是不可能的。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

7. 我不願意和精神病人一起工作。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意

☐ (4) 完全同意

8. 我不願意精神病人做我的鄰居。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

9. 如果我還沒有結婚，我不會和一個精神病人談戀愛。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

10. 許多精神病人犯罪。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

11. 如果知道我的家人和精神病人一起工作，我會擔心家人的安全。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

12. 應該勸阻人們不要和精神病人結婚。

- ☐ (0) 完全不同意

- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

13. 遇到精神病人，我會害怕。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

14. 我不想和精神病人有任何關係。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

15. 精神病人的行為很難預測。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

16. 精神病人無法適應學校生活。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

17. 我不反對和精神病人同乘一輛車上下班。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

18. 如果我的朋友得了精神病，我會儘量和他少來往。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

19. 如果我沒結婚，我不願意和精神病人的家人談戀愛。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

20. 精神病人無法獨立生活。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

21. 我同意在我居住的社區為精神病人修建一個康復宿舍或者活動中心。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意

☐ (4) 完全同意

22. 如果路上遇到精神病人，我會回避他們。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

23. 如果我是工作單位的負責人，我會讓精神病人來參加工作面試，給他們平等工作機會。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

24. 我願意和精神病人交談。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

25. 如果和精神病人在一起，我會覺得不安全。

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

26. 我認為除非精神病人住院，否則會給其他人帶來危險。

☐

- ☐ (0) 完全不同意
- ☐ (1) 有點不同意
- ☐ (2) 不確定
- ☐ (3) 有點同意
- ☐ (4) 完全同意

結語

問卷已結束，您對每個問題的回答都非常寶貴，衷心感謝您的用心作答！

請繼續往下填寫領取小禮物的方式，並請您確認點選本頁最右下方的結束鍵，以確保完整記錄您的填答，謝謝您^^

為感謝您熱心的幫忙，請從下列的方式中選擇一項來領取參與本研究的小禮物：統一超商（7-11）100元電子禮卷一份。將提供給您一組電子序號以方便您至您最方便的統一超商兌換。

- ☐ 手機簡訊寄送，若您選擇此選項，請在空格中留下您的手機號碼

- ☐ 電子郵件寄送，若您選擇此選項，請留下您的電子郵件

- ☐ 其他，若皆不方便，請留下您偏好我們聯絡您的方式

再次感謝您幫忙完成本研究第一階段的線上問卷調查。

最後想調查您對參與本研究之第二階段的意願，在第二階段中，將需要十位媽媽參加一對一面對面的訪談，訪談大約需要一個半小時的時間，過程中訪問者將會與您聊聊心理健康的相關議題，並且結合一些小活動來了解您的看法。您的參與將幫助我們更加了解目前台灣媽媽對一些心理健康相關議題的看法與其發展，並且第二階段所得到的資料將會讓整個研究計劃得到的資訊更添完整。

為了感謝您的參與，訪談結束後會準備一份小禮物回饋給您。若您願意幫忙，請在下面勾選願意參與的選項，我將會從願意幫忙的媽媽中隨機抽出十位參與本研究之第二階段，並以email與這十位媽媽聯絡第二階段的相關事宜。若不方便參加第二階段，則請您跳過不勾選即可。

- ☐ 是的，我願意參加第二階段的一對一訪談

若您願意參加第二階段研究，請在格子中留下您的電子郵件（若您已選擇以電子郵件領取電子禮卷，或是不方便參加第二階段，則請跳過不用輸入，謝謝您）

非常感謝您的協助！祝福您有個愉快的一天 :)

請您點選結束鍵，系統才能完整記錄您的填答，謝謝^^

Survey Powered By [Qualtrics](#)

Appendix H English version of Phase one questionnaires (original and translated)

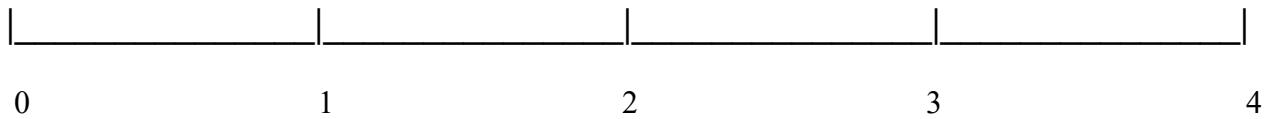
Inventory of Attitudes Toward Seeking Mental Health Services (IASMHS)

For each item, indicate whether you *disagree* (0), *somewhat disagree* (1), *are undecided* (2), *somewhat agree* (3), or *agree* (4):

		0	1	2	3	4
1	There are certain problems, which should not be discussed outside of one's immediate family.					
2	I would have a very good idea of what to do and who to talk to if I decided to seek professional help for psychological problems					
3	I would not want my significant other (spouse, partner, etc.) to know if I were suffering from psychological problems					
4	Keeping one's mind on a job is a good solution for avoiding personal worries and concerns.					
5	If good friends asked my advice about a psychological problem, I might recommend that they see a professional					
6	Having been mentally ill carries with it a burden of shame.					
7	It is probably best not to know <i>everything</i> about oneself.					
8	If I were experiencing a serious psychological problem at this point in my life, I would be confident that I could find relief in psychotherapy.					
9	People should work out their own problems; getting professional help should be a last resort.					
10	If I were to experience psychological problems, I could get professional help if I wanted to.					
11	Important people in my life would think less of me if they were to find out that I was experiencing psychological problems.					
12	Psychological problems, like many things, tend to work out by themselves.					
13	It would be relatively easy for me to find the time to see a professional for psychological problems.					
14	There are experiences in my life I would not discuss with anyone.					
15	I would want to get professional help if I were worried or upset for a long period of time.					

16	I would be uncomfortable seeking professional help for psychological problems because people in my social or business circles might find out about it.					
17	Having been diagnosed with a mental disorder is a blot on a person's life.					
18	There is something admirable in the attitude of people who are willing to cope with their conflicts and fears <i>without</i> resorting to professional help.					
19	If I believed I were having a mental breakdown, my first inclination would be to get professional attention.					
20	I would feel uneasy going to a professional because of what some people would think.					
21	People with strong characters can get over psychological problems by themselves and would have little need for professional help.					
22	I would willingly confide intimate matters to an appropriate person if I thought it might help me or a member of my family individuals with mental illness, I will avoid them.					
23	Had I received treatment for psychological problems, I would not feel that it ought to be "covered up."					
24	I would be embarrassed if my neighbor saw me going into the office of a professional who deals with psychological problems.					

Attitudes Toward Mental Illness Scale
(Translated from original Mandarin version)



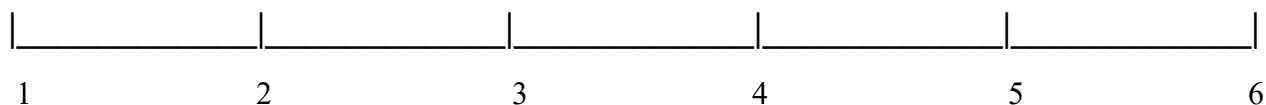
Strongly
Disagree

Strongly
Agree

		0	1	2	3	4
1	Individuals with mental illness can become trustworthy friends					
2	Allowing the individuals with mental illness to have a life freely is dangerous to other people.					
3	The major responsibility of mental illness institutions is to prevent individuals with mental illness from violence or hurting other people.					
4	I will feel embarrassed if I am found to have a family member with mental illness.					
5	I am not willing to live with individuals with mental illness.					
6	It is impossible for individuals with mental illness to form a group for mutual aid similar to what individuals with diabetes or liver disease can do.					
7	I am not willing to work with individuals with mental illness.					
8	I am not willing to have individuals with mental illness in my neighborhood.					
9	I am not willing to being in a romantic relationship with individuals with mental illness.					
10	Many individuals with mental illness commit crimes.					
11	I will worry my family members' safety if I know they are working with individuals with mental illness.					
12	We should persuade people from getting married with individuals with mental illness.					
13	I will feel scared if I see individuals with mental illness.					
14	I do not want to be related to individuals with mental illness at all.					

15	The behaviors of individuals with mental illness are difficult to predict.					
16	Individuals with mental illness cannot adjust into school lives.					
17	I do not oppose to commune with individuals with mental illness in the same vehicle.					
18	If my friends have mental illness, I will interact with them as less as possible.					
19	I am not willing to being in a romantic relationship with individuals whose family member has mental illness.					
20	Individuals with mental illness cannot live independently.					
21	I agree that a rehabilitation center or activity center for individuals with mental illness is built in my neighborhood.					
22	If I see individuals with mental illness, I will avoid them.					
23	If I am in charge of a work unit, I will interview individuals with mental illness and provide them equal working opportunity.					
24	I am willing to talk with individuals with mental illness.					
25	I will feel not safe if I am with individuals with mental illness.					
26	I think individuals with mental illness lead to danger to other people unless they are hospitalized.					

Chinese Individual Traditionality Scale
(Translated from original Mandarin version)



Strongly
Disagree

Strongly
Agree

		1	2	3	4	5	6
1	Before the decision of marriage, the man and the woman should match their “Ba-Ji” first to prevent becoming the bane of the other person’s life.						
2	The children should respect whomever their parents’ respect.						
3	When the husband and wife have disagreement, the wife should submit to the husband.						
4	It violates filial piety to arrange retirement housing for your parents.						
5	To live in the world, it is important to put yourself at first priority and defend yourself.						
6	The reward of a job should be contingent on the tenure first and then the ability.						
7	The arguments among people should be mediated by the person with the highest position.						
8	A man is the master of a family, so the decisions in a family should be made by husband.						
9	It is the wives responsibility to take care of the husbands’ parents.						
10	Everything is destined.						
11	The more the young have knowledge about sexuality, the more problem they cause.						
12	Complying to authority and respecting elders is a virtue that every child should learn.						
13	Taking part in political activities is by no means beneficial to women.						
14	The children should pay attention their manner and possess respectful attitude toward the elders.						

15	Whoever is right or wrong, we should avoid arguing with people who are wealthy or powerful.						
----	---------------------------------------------------------------------------------------------	--	--	--	--	--	--

Emotion Regulation Questionnaire (ERO)

We would like to ask you some questions about your emotional life, in particular, how you regulate and manage your emotions. For each item, please answer using the following scale, from (1) Strongly disagree to (4) Strongly agree.

		1	2	3	4
1	When I want to feel more positive emotion (such as joy or amusement), I change what I'm thinking about.				
2	I keep my emotions to myself.				
3	When I want to feel less negative emotion (such as sadness or anger), I change what I'm thinking about.				
4	When I am feeling positive emotions, I am careful not to express them.				
5	When I'm faced with a stressful situation, I make myself think about it in a way that helps me stay calm.				
6	I control my emotions by not expressing them.				
7	When I want to feel more positive emotion, I change the way I'm thinking about the situation.				
8	When I am in a stressful situation, I will find a way to calm myself down.				
9	When I am feeling negative emotions, I make sure not to express them.				
10	When I want to feel less negative emotion, I change the way I'm thinking about the situation.				
11	I control my emotions by changing the way I think about the situation I'm in.				
12	In the face of stress, I will come up with some ways for me to deal with it calmly.				

Berkeley Expressivity Questionnaire (BEQ)

For each statement below, please indicate your agreement or disagreement. Do so by filling in the blank in front of each item with the appropriate number from the following rating scale

1	2	3	4	5	6	7
Strongly Disagree					Strongly Agree	

- ___ 1. Whenever I feel positive emotions, people can easily see exactly what I am feeling.
- ___ 2. I sometimes cry during sad movies.
- ___ 3. People often do not know what I am feeling.
- ___ 4. I laugh out loud when someone tells me a joke that I think is funny.
- ___ 5. It is difficult for me to hide my fear.
- ___ 6. When I'm happy, my feelings show.
- ___ 7. My body reacts very strongly to emotional situations.
- ___ 8. I've learned it is better to suppress my anger than to show it.
- ___ 9. No matter how nervous or upset I am, I tend to keep a calm exterior.
- ___ 10. I am an emotionally expressive person.
- ___ 11. I have strong emotions.
- ___ 12. I am sometimes unable to hide my feelings, even though I would like to.
- ___ 13. Whenever I feel negative emotions, people can easily see exactly what I am feeling.
- ___ 14. There have been times when I have not been able to stop crying even though I tried to stop.
- ___ 15. I experience my emotions very strongly.
- ___ 16. What I'm feeling is written all over my face.

Appendix I: Mandarin (original) Phase two participant information sheet and consent form



研究簡介暨參與研究同意書

親愛的媽媽，您好：

首先，感謝您繼續參與本次研究的第二階段。此階段的研究主要目的在於以訪談的方式，用您的角度來了解您對心理健康相關議題的看法。此次的追蹤訪談，將能幫助我們更深入探索台灣媽媽對專業心理協助的態度和想法與其發展。並期待藉由此次的探究，幫助往後相關研究議題，以及進一步在未來協助促進台灣社會家長與孩童的心理健康與發展

此階段研究過程將由研究者與媽媽進行一對一訪談，內容包括與您進行對話，並請您完成一些小活動。過程中會進行錄音，以做後續的分析，時間共需約一個半小時。

本研究是由英國劍橋大學教育學系博士候選人張均后，在指導教授 Dr. Carol Holliday 與 Ruth Kershner 共同指導下所進行，並承諾堅守相關研究倫理。本研究相關倫理經由英國劍橋大學教育系倫理委員會審查通過，以確保您的權利。

基於我們對於您個人權益以及研究倫理的尊重，本研究對您有以下承諾：

※您有權隨時停止參與本研究，或停止作答。

※您有權要回您的資料，並且撤銷被納入分析。

※若您有需要，您有權在本研究結束後知道研究結果。

※如有任何疑問，您可隨時經由下方所附之聯絡方式與研究人員進行聯絡。

本研究之結果，僅供學術使用，將不做其他用途；本研究調查中的所有問題都沒有對錯或好壞的判斷，請您自由地按照您真實的直覺想法來回答，您的所有回答與意見都是最珍貴的資訊。此次研究的所有過程中，您的所有資料將被匿名保密，這表示所有指稱您身份的資訊，如姓名或確切的聯絡方式等資料即使在分析或未來結果報告中都被保密，請您放心，謝謝您的合作！

如您同意參與本研究，請於下頁簽名並留下您的聯絡方式，再次謝謝您的時間和貢獻。

本人已詳細閱讀本同意書，並同意參與研究。

參與者簽名：_____ 日期：____年____月____日

聯絡方式：

再次感謝您的幫忙😊

研究者：張均后

英國劍橋大學教育系博士候選人

聯絡電話：0905-070354

聯絡電子郵件：chc55@cam.ac.uk

2. 聯絡地址：Faculty of Education,

University of Cambridge,

184 Hills Road, Cambridge

CB2 8PQ, UK

研究者簽名：_____ 日期：____年____月____日

Appendix J: English (translated) Phase two participant information sheet and consent form



Information sheet and Consent form

Greetings to dear moms:

First of all, I sincerely appreciate that you continue to participate in the second phase of the current study. This phase of research aims at understanding your point of views and understanding about psychological health related topics through interview with you. We expect that this follow-up interview will facilitate deeper exploration and understanding of attitudes and thoughts regarding professional psychological help are and how they developed. This will benefit future aspiration in promoting, and advancing children's psychological well-being in the Taiwanese society.

In this phase, I will be doing a face-to-face interview with you individually, and each interview will last about one and a half hour. The interview will include conversations and small tasks. The whole process will be recorded.

This project is being supervised by Carol Holliday and Ruth Kershner and is adhered to the relevant ethical frameworks for research. Your ethical rights are ensured through the examination by ethical review board of the faculty of education in the University of Cambridge. Based on research ethics and our respect for your personal rights, present study promises the followings:

- ※ You have the right to withdrawal from the study or cease answering to any questions at any point in the research.
- ※ You have the right to retrieve your data.
- ※ You have the right to know about the results if you want.
- ※ If you have any doubts or questions, you can contact the researcher through the contact information we provide here anytime.

The results of this study will only be used in academic purpose. Your responses and opinions during the whole research process will be highly valued. There is no right or wrong answers to the questions posed in our interviews, therefore please feel free to express your opinion. Confidentiality is assured through maintaining anonymity of all of your data. This means that we omit any identifying details such as name, precise contact details etc. Thank you very much for your cooperation.

If you agree to participate in our study, please sign your full name below and leave your preferred contact information. Thank you again for your time and contribution.

I already read through all of the material and I agree to participate in this study.

Signature: _____

Date: _____

Contact information :

Graduate student at the Faculty of Education,
University of Cambridge
Chun-Hou Chang
Contact number: 0905-070354
Email: chc55@cam.ac.uk
Contact address: Faculty of Education,
University of Cambridge,
184 Hills Road, Cambridge
CB2 8PQ, UK

Researcher Signature : _____

Date : _____

Appendix K: Mandarin (original) interview protocol for Phase two

訪談大綱

訪談之前：

問好，並請媽媽先詳讀同意書，同意本階段研究的各項注意事項後簽名表示願意參加，才開始後續訪談。

簡短介紹：

媽媽您好，非常感謝您願意繼續幫忙本研究的第二階段。今天我們會來聊聊您對心理健康的一些想法跟意見。在接下來的約一個半小時中，我會訪問您對一些問題的看法，然後也會請您幫我完成一些非常簡單而且簡短的小活動，中間如果您覺得累，我們可以休息十五分鐘在開始完成後半的訪談。那如果您準備好了我們就可以開始今天的訪談。

第一階段：

Warm up (將時間控制在十分鐘內)

- 請問您是做什麼工作的？請問您平時的生活是怎麼樣的？
- 您跟誰同住呢？家裡是怎麼樣的組成？
- 從您的寶貝出生到現在，您覺得跟他相處互動的過程感覺如何？
- （可問可不問）一般來說，依您的經驗或觀察，親子互動中可能會遇到哪些問題？（舉例來說，哪些可能會引起家長或孩子感覺到困難，挫折，或是情緒困擾的問題）

第二階段：

情緒表達

● 小活動一（5 分鐘）

現在我想請您用這個像是心情溫度計的東西，來幫助我了解您通常怎麼表現不同的感受與情緒。

情緒表達溫度計 Emotion expression thermometer

範例問題

依照您的經驗，如果您內心感覺到程度 100 的“生氣”，您會表現出多少程度出來？（情緒可用不同種類取代）



● 訪談問題（10 分鐘）

這個階段的小活動告一段落，謝謝您協力配合完成，接下來我將請您聊聊一些相關的問題。（我們來談談；我們來聊聊；我想請問您）

- 您覺得您有多常向別人表達或分享您的感受？
- 您是否（會）覺得有些情緒跟感覺比起其他的情緒跟感覺較不適合表現或表達給其他人知道？為什麼？（舉情緒的例子）？
- 您會嘗試避免表現或表達什麼特定的情緒嗎？為什麼？（如果內容都傾相負向，正向也可以問問看）
- 您通常都用什麼方法面對或處理您的情緒？（可以澄清多一點，當您想要轉變或調整自己的感覺或情緒的時候）？

可能可以問得更細節的問題：

- ✓ 對不同的對象有什麼不一樣的考量？
- ✓ 您覺得身處華人文化中，跟您以上所說的這些想法有沒有什麼關聯？

休息十五分鐘

第三階段：

對心理/精神疾病的看法

● 小活動一 (10 分鐘)

Repertory grid

憂鬱症；躁鬱症；思覺失調症<精神分裂症>；焦慮症；自閉症譜系障礙；阿茲海默症；感冒；癌症；糖尿病；腸胃炎；骨折；氣喘

Step1-

隨機從籤筒抽三個元素出來，請媽媽分類（示範一次）

“在這些被抽中的「疾病」中，哪一個與其他兩個有較不同的地方 “

”Out of the three elements chosen, which one seem to have something more different with the other two?”

Step2-

”可以請您告訴我，這兩個疾病有什麼相同的特徵（面向），而什麼特徵（面向）又讓另一個不同於這兩個呢？

“Would you describe to me what aspect these two elements share and what aspect makes the third element different from the other two?”

重複步驟一和二十次，並將每次的答案記錄在記錄紙上，過程中若抽到相同的重抽三個元素

Step3-

請受試者對每個疾病都在剛剛生成的量表上評分一到五分

● 訪談問題(10 分鐘)

這個階段的小活動告一段落，謝謝您協力配合完成，接下來我將請問您一些相關的問題。

- 當您聽到心理/精神疾病，您直覺會想到什麼？
- 您怎麼看待心理/精神疾病？
- 能請您比較看看生理疾病跟心理/精神疾病嗎？您認為他們有什麼相同或相異之處嗎？
- 您覺得一個有心理/精神疾病，困擾的人，可能會面臨什麼樣的問題或狀況？

可能可以問得更細節的問題：

- 您覺得身處華人文化中，跟您以上所說的這些想法有沒有什麼關聯？

第四階段：

對專業心理協助的態度

- 小活動一 (5 分鐘)

- Dependency grid

可不可以請您幫我想想看，依您的經驗或觀察，我們在生活中可能會遇到哪些狀況或問題，而引起我們感覺到情緒上的困擾？（如果媽媽不願意想或是想不到，那再舉一些相關的例子）

我們把這些狀況填入表格中，然後請您想像或回憶看看，當遇到這些狀況時，你覺得您可能會想要去尋求這邊列舉的哪些人的幫忙？並在框框裡面打勾。如果您有想到什麼重要的資源是這邊沒有列舉到的，可以在空白的格子裡填上。

- 小活動二 (10 分鐘)

Repertory grid:

接下來請媽媽幫我從上面我們討論到可能造成情緒困擾的情境裡挑一個出來，我們要來想像當自己面臨到這樣的情境時，你對不同的資源的看法。

Step1-

隨機從籤筒抽三個元素出來，請媽媽分類

“在這些被抽中的「資源」中，哪一個與其他兩個有較不同的地方 “

”Out of the three elements chosen, which one seem to have something more different with the other two?”

Step2-

” 可以請您告訴我，這兩個資源有什麼相同的特徵（面向），而什麼特徵（面向）又讓另一個不同於這兩個呢？

“Would you describe to me what aspect these two elements share and what aspect makes the third element different from the other two?”

重複步驟 1 和 2 十次，並將每次的答案記錄在記錄紙上，過程中若抽到相同的重抽三個元素

Step3-

請受試者對每種資源都在剛剛生成的量表上評分一到五分

- 訪談問題 (20 分鐘)

這個階段的小活動告一段落，謝謝您協力配合完成，接下來就是這次訪談的最後一部分，我將再請問您一些相關的問題。

- 當您聽到專業心理協助，例如心理治療，或是心理諮商，您直覺會想到什麼？

- 如果有人去接受心理治療或是諮商，您覺得這代表什麼？（您會覺得這個人怎麼樣？可使用 Self-characterization，以口頭的方式以第三人稱

敘述這個人的故事跟個性)

- 能不能請您回想看看，您是否曾經有過自己無法處理的情緒困擾？

如果媽媽有相關經驗並願意分享：

- 當時您曾經考慮過找心理方面的專業人員的協助嗎？
- 您考慮了哪些因素？
- 最後有尋求相關協助嗎？什麼原因？

- 能不能再請您回想看看，您的孩子是否曾經有過他自己以及您無法處理的情緒困擾？

如果媽媽有相關經驗並願意分享：

- 當時您曾經考慮過幫您的孩子找心理方面的專業人員的協助嗎？
- 您考慮了哪些因素？
- 最後有尋求相關協助嗎？什麼原因？

- 如果媽媽不願意提供相關經驗或是沒有相關經驗

- 想像看看如果您未來面臨一些情緒的困擾是您自己沒辦法處理的，您會想要尋求專業心理人員的協助嗎？為什麼？
- 想像看看如果您的孩子未來面臨一些情緒的困擾是他自己以及您沒辦法處理的，您會想要帶著他尋求專業心理人員的協助嗎？為什麼？

-

可能可以問得更細節的問題：

- 想像看看如果您的親友面臨一些情緒的困擾是他自己沒辦法處理的，您會想要建議他尋求專業心理人員的協助嗎？為什麼？
- 您覺得身處華人文化中，跟您以上所說的這些想法有沒有什麼關聯？

Appendix L: English (translated) interview protocol for Phase two

Interview protocol

Pre-interview:

Informed consent will be provided to the participating moms, agreement will be asked before any further conversations.

Brief introduction:

(Greetings first) Thank you very much for participating in this study. Today we are going to have a chat about your thoughts and opinions regarding psychological health. In the following one and a half hour, I will need you to answer a few questions, and complete some simple and brief tasks for me. After the first two parts, we can take a 15-minute break. We can begin whenever you feel ready.

Stage one:

Warm up (contain the duration within 10 minutes)

- What do you do? How would you describe your ordinary life?
- What is your household like?
- From the birth of your baby/children until now, you have been with your baby for about (time length), how do you feel in this process?
- In a general sense, what kind of problem do you think can arise in parent-child interaction? (For example anything that might cause difficulties, frustration or any emotional distress)

Stage Two :

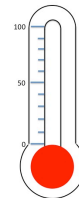
Emotion expressivity

- Task1 (5 minutes)

Next I am going to ask you to show me how you usually express your different emotions and feelings in your life using this thermometer like scale.

Emotion expression thermometer

Example question:



If you feel 100 degree of “anger”, to what degree do you think you would show? (the emotions “” can be replaced by others)

- Interview questions (10 minutes)

The tasks in this stage are completed, thank you for your effort in doing them. Now I am going to ask you some further related questions.

- How often do you think you talk about your feelings with others?
- Do you think some emotions are more inappropriate to express to others than others? Why?
- Do you try to withdraw from expressing certain kind of emotions? Why?

15-minute break

Stage three :

Thoughts regarding mental illness

- Task1 (10 minutes)

Repertory grid

See how the participants construe mental illness by incorporating different kinds of illness as elements including mental illness and physical illness (currently have: depression, bipolar disorder, Schizophrenia, anxiety disorder, Autism spectrum disorder, Alzheimer, cold, cancer, diabetes, Gastroenteritis, broken bone, asthma)

Step1-

The researcher randomly draw three random element cards from the pile. Ask the participant “ Out of the three elements chosen, which one seem to have something more different with the other two?”

(demonstration)

Step2-

The researcher asks ” Would you describe to me what aspect these two elements share and what aspect makes the third element different from the other two?”

Repeat Step1 and Step2 ten times to extract enough constructs. (record on the record sheet)

Step3-

Ask the participants to rate on the record sheet each mental illness and physical illness to the construct they described. (1 to 5 point scale)

- Interview questions (10 minutes)

The tasks in this stage are completed, thank you for your effort in doing them. Now I am going to ask you some further related questions.

- When you hear about mental illness, what comes to your mind?
- What do you think of mental illness?
- Would you please compare physical illness and mental illness? What are their similarities or differences between each other?
- What kind of situation or problem you think might be when a person face mental difficulty?

Stage four:

Attitudes towards professional psychological help

- Task1 (5 minutes)

- Dependency grid

Please use the table below to show what kind of resource or resources you usually turn to when you encounter the listed situations. (Ask the participants to think or imagine relevant experience. If they cant think of any, provide example situations)

Tick in the cell if you tend to use that resource in A, B.. or E.

(finding out how they usually use the resources around them in different contexts)

- Task2 (10 minutes)

Repertory grid:

Use the situation provided earlier as a context for the participants to differentiate different kinds of resources using repertory grid when themselves face the situation

For all repertory grid tasks follow the following protocol.

Step1-

The researcher randomly draw three random element cards from the pile. Ask the participant “ Out of the three elements chosen, which one seem to have something more different with the other two?”

Step2-

The researcher asks ” Would you describe to me what aspect these two elements share and what aspect makes the third element different from the other two?”

Repeat Step1 and Step2 ten times to extract enough constructs.

Step3-

Ask the participants to rate each resources to the construct they described. (1 to 5 point scale)

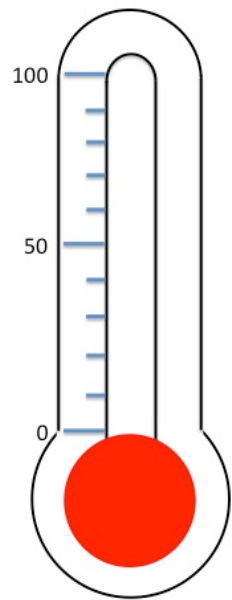
- Interview questions (20 minutes)

The tasks in this stage are completed, thank you for your effort in doing them. For the final part of today’s interview, I am going to ask you some further related questions.

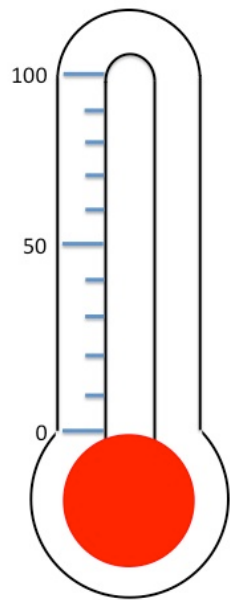
- When thinking of professional psychological help such as psychotherapy and counselling, what comes to your mind?
 - When someone goes to professional psychological help, what does that mean? What says about that person? (Self-characterization may be used here)

- Would you try to remember a time when you face emotional disturbance that was beyond your control for me?
If the participants agree and provide an experience:
 - Did you consider seeking help from psychological professionals?
 - What did you consider about?
 - Did you go in the end? Why?
- Would you try to remember a time when your baby/children face emotional disturbance that was beyond your control for me?
If the participants agree and provide an experience:
 - Did you consider seeking help from psychological professionals for your child?
 - What did you consider about?
 - Did you go in the end? Why?
- *If the participants do not agree or has no applicable experience:*
 - Would you go to professional psychological help in the future if you face emotional disturbance that is beyond your control? Why?
 - Would you go to professional psychological help in the future if your child face emotional disturbance that is beyond your control? Why?

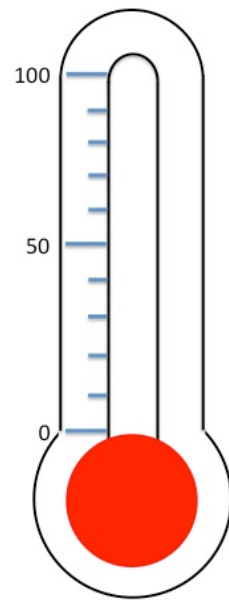
Appendix M: Emotion expression thermometer task



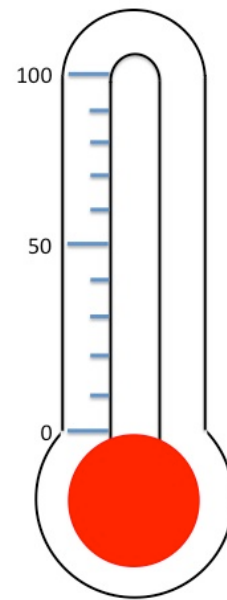
生氣



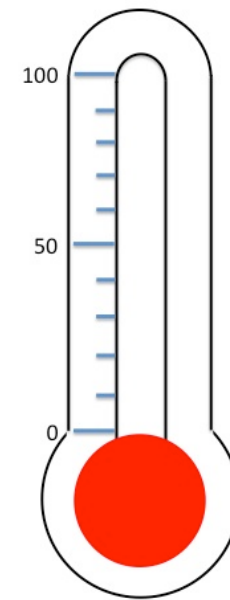
快樂



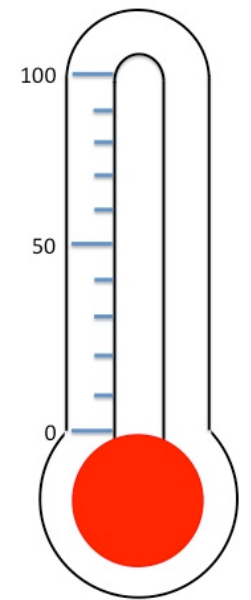
悲傷



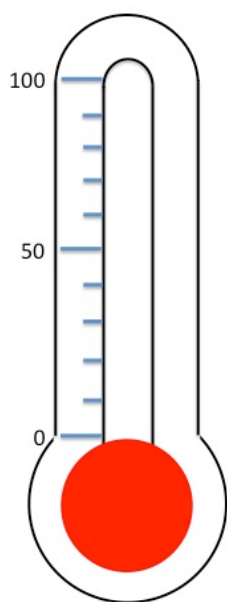
害怕



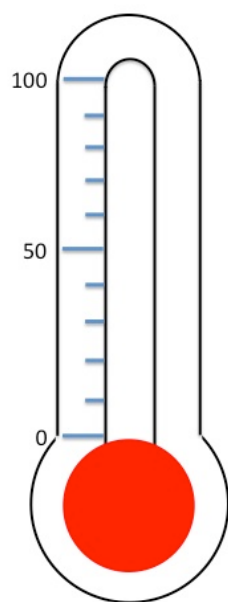
驚訝



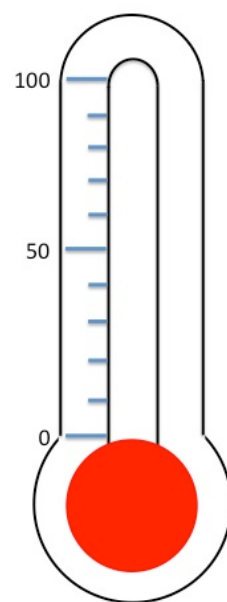
緊張



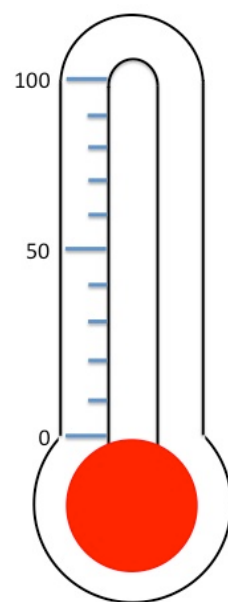
擔心



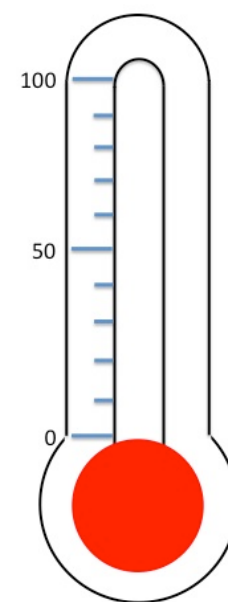
愉悅



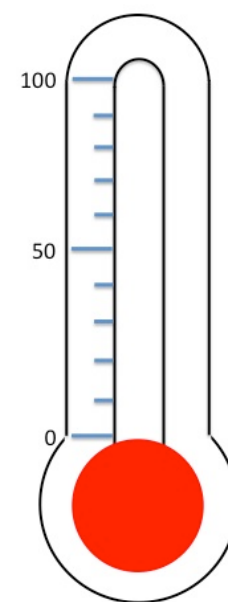
恐懼



雀躍



憤怒



失望

Appendix N: Photos of repertory grid elements





Appendix O: Dependency grid table

<div>資源</div> <div>情緒困境</div>	自己	伴侶	父母	心理師	朋友	醫生	親戚	師長	網友	信仰		

